The Journal of

Pastoral Care

VOL. VII SPRING, 1953 NO. 1

PSYCHOANALYSIS AND MODERN VIEWS ON HUMAN EXISTENCE AND RELIGIOUS EXPERIENCE

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Remarks on the Psychoanalytic Theory of Personality

In my practice as a psychoanalyst I have met with two seemingly very different attitudes of patients regarding religion. One group of patients profess a pronounced disinterest in, perhaps even contempt of, religious beliefs and religious feelings. They usually assume that I have a similar attitude, aside perhaps from a scientific interest in the oddities of religions. Another group of patients (and they are in the minority) may have more or less strong positive feelings and convictions in regard to religion, but are likely not to discuss these because of their assumption that I as an

Adapted from a lecture presented in Washington, D. C., May 6, 1952, the third in a series entitled "Christianity and Psychoanalysis." The entire series of four lectures and panel discussion was published by the Organizing Committee, Christianity and Modern Man, with authorized recording and production by the Henderson Services, 1029 20th Street, N. W., Washington 6, D. C. This publication may be obtained from the Henderson Services at a price of $3.00. Further information concerning the aims and publications of the Organizing Committee of Christianity and Modern Man may be obtained from Mrs. David D. Lloyd, 2501 Ridge Road Drive, Alexandria, Virginia.

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analyst would not be able to share such feelings with them or would disapprove of them.

These two attitudes have one thing in common: the notion that an analyst thinks little, if anything, of religion. And here they are supported by popular conceptions and misconceptions regarding psychoanalysis, as well as by certain scientific or semi-philosophical views and writings of some psychoanalysts. But these two groups of patients have something else in common: a defensive attitude toward their childhood religion. The patient who scoffs at religion defends himself against it by way of ridicule or contempt; the patient who believes, by keeping his religious interests and beliefs hidden from view, as a secret which must not be given away or shared.

Religious feelings belong to the innermost—and at the same time most universal, all-embracing—experiences of the human being, and are built up on the basis of earliest urges, needs, memories, and impressions. The essence of religious experience, which is a more or less acute experience of self in relation to a universal being or to universal beings, is what we call faith or trust and its counterparts, the failure and the lack of faith. These latter, failure and lack of faith—that is, doubt and despair—are no less fundamental in human religious experience than presence and strength of faith.

In our time, failure and lack of faith (which also includes pseudo-religiosity) are the modes of religious experience of many people in all walks of life. The philosopher Nietzsche, one of the fathers of existentialism as well as of psychoanalysis, expressed this modern lack of faith in the words, "God is dead." But his tragic life and his whole philosophy show not only how he mourned over this death until he broke in despair, but also how urgently he attempted to find a way to a living God, because he knew that God is dead insofar as he has fallen out of our experience and our existence. Nietzsche knew that it is our existence which we have to re-evaluate, that we have to find new ways of our own to the grounds, the limits, and the relations of our existence with God.

The people who profess disinterest in or contempt for their religion have to deny their need for faith and trust. Those who keep their religious feelings hidden are ashamed of this need. In treating and studying such patients, we find that their early trusting relations with those around them have been deeply disturbed. (I am speaking of persons who in their childhood and background have been in significant contact with religious beliefs and practices. As to those who have not, if they manifest signs of disturbed early relationships—of the disturbance of faith and trust—they do so not by denial or shame of religion, but in other areas.)

I have said that failure and lack of faith are fundamental elements of religious experience; that doubt and despair and the absence of God characterize, much more than the presence of faith, the religious experi-

ence of our time. Our age has been called the age of anxiety. Apart from the all too visible signs of anxiety and the desperate attempts to dispel it, there seems to be no age which has paid so much attention to the phenomenon and to the manifestations of anxiety as our own. While anxiety is inherent in the human condition, which is characterized by the freedom to be or not to be, perhaps at no previous time has the human mind so clearly grasped the fundamental importance of anxiety and its ubiquity in man's existence.

Kierkegaard, another of the originators of existentialism, was the first to write about anxiety. Freud struggled throughout his life with the problem of anxiety, first mainly from a biological point of view, later more and more from the standpoint of its psychological manifestations and its psychological origins. One of Freud's tentative answers was that anxiety is a response to the threat of loss of love. And through his investigations into the origin of religious feelings, he came to the conclusion that they are based on the need for the love and protection of an all-powerful figure.

Heidegger, the most profound of the existentialist philosophers, has dealt extensively with the phenomenon of anxiety. Anxiety, for him, is the experience of nothingness, of man's possibility of finding himself unrelated, confronted with "the abyss of naught." On the philosophical level (that is, a level of higher abstraction and generalization), Heidegger expresses what Freud speaks of in psychological terms as the threat of loss of love. And even Freud's earlier, more biological formulations show the same idea; for then Freud understood anxiety as the manifestation of inadequate release of libidinal tension. "Libido" is his term for the drive of the human being toward the outside, toward others; and the lack of libidinal release, the frustration of the libidinal urge, results in the experience of the threat of unrelatedness, of anxiety.

While this may be the deepest source of anxiety, psychologically speaking anxiety appears in any situation of inner conflict. A psychological conflict arises in a situation where a decision has to be reached between following or expressing one of two or more opposite inner forces. We feel anxious because we are threatened with having to give up one or the other need or drive, one or the other interest or pursuit, one or the other person or thing we want or love, one or the other passion or desire.

Any conflict thus confronts us with at least two possibilities of self-realization, only one of which we can actualize; the other will be nothing. It is this dilemma which Kierkegaard has in mind when he speaks of anxiety as the reality of freedom. Anxiety arises when man is confronted, in a conflict, with the reality of freedom: that is, with the fact that he has to choose, has to decide, in order to realize one of his possibilities, in order to come to self-realization.

There are many ways in which this freedom, of which anxiety is a sign or signal, is evaded or defended against in human life. Psychoanalysis

has studied many of the details and vicissitudes of such evasion and defense, leading to self-restriction. Neurotic symptoms can be understood as manifestations of such self-restriction. At the same time, they express in disguised manner, often cut off from self-awareness, the original opposing forces. They are strong enough to make themselves felt despite the self-restriction, but neither one of the opposing forces has been responsibly taken over and realized by the individual.

It should be clear from these remarks that anxiety is not understood, either by existentialism or by psychoanalysis, as something which should not exist or has to be treated away. It is true that excessive anxiety may paralyze adequate functioning, but it is equally true that the continuous evasion and avoidance of anxiety leads to crippling neurosis or to a deadening of the whole personality. If anxiety, as Freud has said, is the signal of an inner danger, it is not only necessary as an alarm to alert us to the danger, but it also reminds us of our freedom, which is called up in a conflict, and urges us to stand and live through the danger of conflict.

While this aspect of the problem of anxiety is not clearly recognized in the theoretical formulations of psychoanalysis, it plays a major role in psychoanalytic treatment, where the patient, within the shifting limits of his tolerance, is again and again confronted with his conflicts and with his anxiety. Increasing understanding and awareness of the reasons for his failure or limitations in trust and love is gained, through the persistent help of the analyst, in understanding his past failure and in developing greater trust and security in the relationship with the analyst. This enables the patient more and more to face his conflicts and anxieties and to make responsible choices, accepting both his self-realization and his nothingness.

I mentioned the relationship between anxiety and the fact that the human being finds himself, in a conflict situation, confronted with his freedom of choice. He has to choose between one or the other possibility, which always means between one or the other of his own possibilities of self-realization. The phenomenon of human freedom, while in psychoanalytic treatment we have to deal with its problems every day, has not yet been properly understood or investigated in the psychoanalytic theory of the personality. It is implied in such psychoanalytic concepts as ego-strength and reality-principle.

One aspect of the reality-principle, as Freud understands this term, is the growing awareness of man that he is finite, that he has limitations, and that he cannot simply follow the path of pleasurable satisfaction as indicated by his needs and impulses. According to Freud's formulation, in the development of the individual the pleasure-principle has to give way to the reality-principle. The reality of the human situation, of which the growing individual gradually becomes aware, is that man has to make choices and decisions, has to renounce certain needs and satisfactions, certain inner potentialities, in order to seize and realize others. The earliest way by which he comes to understand this is the realization that he lives

with and is dependent on others, at the very first his mother, and later the members of his family in general.

The child discovers that he is not omnipotent. Freedom is not omnipotence; in fact, the individual becomes aware of his freedom when he discovers that he is not omnipotent. The concept of omnipotence is fundamental for the psychoanalytic understanding of the development of the individual. It can best be illustrated if we consider the psychological situation of the infant.

The newborn is altogether dependent on the care of his environment, especially his mother. Until birth, he was biologically a part of her; after birth, he is still psychologically part of her. A relationship with her, with the environment, with the outside (in the psychological sense of the word), develops only as the process of growth entails an increasing emancipation and independence from the continuous and all-embracing care on the part of the mother.

Thus, while the infant is completely dependent, and still almost without power in the sense of active strength, he is all-powerful, omnipotent in the imperativeness of his dependent needs which have to be taken care of in the interest of his survival and development. The power of such dependency can be seen and felt in certain types of neurotic individuals who, as adults, dominate their environment by the demanding power of their dependent needs, of their passivity.

Further, for the small child who psychologically is not yet fully separated from his environment, there is no clear distinction between a self and a non-self. The powers which he can command through his imperative dependent needs are felt by him not as his powers, but he and the outside powers are still one and the same. In this sense any outside power is at the same time his own. And the power of his drives is at the same time "outside," all around him. Any lack or absence of power and action around him is at the same time his own powerlessness. Omnipotence and impotence in this sense go together.

The infant is thus both at the mercy and in command of the people, the powers, around him. He is also, to start with, at the mercy of the strength of his needs and drives. Only gradually does he gain control and mastery of them, through the development of what psychoanalysis calls the "ego." The ego is the organizing, integrating center-force of the human being, that element in man which, through differentiation and integration of the psychological unit child-environment, organizes the human being into a separate individual during the developmental process. Through the organizing activity of the ego, the growing child becomes an individual, and the environment gains for him the significance and richness of external, articulate reality which is both to be mastered and yielded to.

The strength of the ego, which in its formation also goes through a developmental process (some aspects of which have been studied), is no

longer the uncontrolled, passive power of omnipotent dependency and drive, but the finite, self-limiting, and contained strength of freedom.

The power of omnipotent dependency and drive which is gradually tamed, organized, and transformed into the controlled, finite strength of ego-freedom is the power of the unconscious. Freud's genius consisted in his understanding of emotional and mental illness as the manifestation and emergence of a misdirected and misguided process of transformation of the omnipotent and unorganized unconscious into the active, formed, and directed strength of individual freedom. The vicissitudes in this process of transformation, which is the process of emotional, mental, and spiritual growth, are the subject of study and understanding and of redirecting intervention by the psychoanalyst as a scientist and as a psychotherapist.

Psychoanalysis, starting out as a method of therapy, has paid more attention to pathological development and its causes and expressions. Faulty functioning has always been a prime incentive to human endeavors to understand and master, and thus has always shed light on normal function and its mechanisms. The vicissitudes of the psychological growth process of the human being have been studied mainly insofar as they may be expressions and focal points of the outbreak of illness.

Psychological illness, then, is basically understood in psychoanalysis as the miscarrying of the processes of transformation of the unbound, unformed forces of the unconscious into the bound, finite organization of the ego's individual freedom.

Freud recognized that nothing is less free than the omnipotent unconscious. He saw that nothing is less free than the individual who is, with or without being aware of it, dominated by the limitless, overrunning power of his unconscious forces. To state it another way, Freud recognized the lack of freedom in the individual who is not allowed, and does not allow himself, to organize the unconscious forces within, who has to exclude important elements of his unconscious from growth and development, so that they cannot undergo the transformation into ego-elements. This failure in the growth process of the individual, by which essential elements of his being have to be excluded or mislaid and mishandled, as it were, has been called "repression."

Freud's theory of repression, gained at first from his observations of patients suffering from hysteria, came to encompass and express his profound insight into and criticism of some of the cultural-social ills of the time. Not that he was the first or the only one to see them, but he was the first to investigate and understand their far-reaching implications for the emotional disturbances of patients. He found that, through the process of unconscious and conscious education and acculturation which the growing child undergoes, many of the primary needs and drives of the human being are driven underground, out of awareness, and are denied a place in the process of ego-development.

Modern man, perhaps because of the enormous increase in his conscious power to harness and press natural forces and processes into his service, ignored the nature and inner workings of growth. On the one hand, it was not understood that the primary, elementary needs and drives themselves are to be educated and cultivated so that they may grow—meaning that they may become transformed into more complex and higher forms of functioning. On the other hand, it was not understood that these higher forms of functioning, which could be seen and which were so highly valued in adults, grew out of the primitive matrix of elementary needs and drives. In fact, there existed a strong resistance against the knowledge of man's primitive beginnings, as if it would offend the dignity of man. In order to become adult, it seemed necessary to suppress and drive underground a large part of the elementary urges and strivings, under the delusion that they would simply disappear and make room for the higher, more noble strivings, feelings, thoughts, and activities.

Conversely, it was assumed (and some recent pronouncements against psychoanalysis seem to share this assumption) that man's highest emotions and achievements are endangered, contaminated, or denied by understanding their genetic development and its vicissitudes from primitive and low beginnings. The genetic connections between "higher" and "lower," between that which is earlier and that which develops out of it and thus comes later, were not seen. Psychoanalysis found, in treating patients, that the odd and disturbing symptoms, the troubling emotional and mental conditions, are expressions—often in very distorted ways—of the misdirected and misunderstood needs and drives which were pushed underground; that it is they which play havoc with the patient's life and higher development. In many patients so much that seems adult, noble, and high-minded is a façade kept up with a tremendous waste of energy, at the cost of often unbearable anxiety, hostility, and guilt feeling, inhibiting true feeling and creativity.

The psychoanalytic theory of personality attempts to retrace the steps, the stages in development, which have led to the highly integrated organization that is the adult human being. Implied in this conception is the view of the human being as a center of integrative activity in time-space, not a static entity endowed with immovable qualities. The highest, that is, the most integrated, stages of this organization—in other words, the highest faculties and the highest achievements and feelings of human beings —are to be understood as developed from the lowest, most primitive organizational stages in the process of psychological integration. And they derive any dignity they may have from the inner work of such growth.

This does not mean, as is so frequently believed, a reduction of the higher to the lower—in the sense that, for instance, adult, mature love was but a fiction, an unreal "superstructure" of primitive instinctual needs and impulses. It is true that, to begin with, psychoanalysis frequently gave rise to and shared this misapprehension. It should be clearly understood,

however, that psychological structure, function, and significance change fundamentally in the developmental process. The term "integration," more and more used in psychoanalytic thinking, indicates and implies the qualitative changes brought about through processes of growth and organization.

The Limitations of a Psychoanalytic View of Religion

I do not believe that there is, or could be now, a psychoanalytic understanding of Christianity. I think there do exist some elements—but only some—for a psychoanalytic theory of religious practices and religious experiences.

Psychoanalysis as the representative of modern dynamic psychology, and as the science of the genetics, the integration of the human personality, is a very young science. In its attempts to establish a genetic and dynamic understanding of the personality, to find a way back to origins and primitive beginnings which would illuminate and clarify later forms of development, psychoanalysis has evolved some views on the origins of religion and on the psychological function of certain primitive structured religious practices and rituals. Psychoanalysis, I believe, is as yet in no position to provide anything approaching an adequate psychological understanding of such highly integrated human functions as are reached and manifested in the genuine religious experience and thought of Christianity.

If this is understood, it is possible to appreciate what psychoanalysis so far has been able to contribute to the psychological understanding of religion. Freud dealt with religious phenomena mainly from two points of view. He was struck by the similarity which exists between the rigidity and repetitiousness of many religious rituals and ceremonies, and the rigidity and repetitiousness of behavior and thought in certain types of neurotics.

Many patients suffering from obsessive-compulsive neurosis go through certain seemingly senseless daily performances of a ritualistic type. Certain acts or movements have to be executed, certain thoughts have to be thought; and on investigation it becomes clear that they are what we might call security operations or defenses. They serve to avoid or allay anxiety, to assuage guilt feelings, and they are intended to banish or to placate what are felt to be powerful hostile forces.

These powerful forces may be strong inner drives and urges which are felt to be evil, such as sexual drives, greed, hatred; or external powers—punishing parents, sickness, cruel fates, a severe and watchful God. In fact, the inner and outer overpowering forces are related to each other: the more overwhelming and evil the inner drives are felt to be, the more are the external forces experienced as hostile and punishing, and vice versa.

Many of us remember how as children we would, perhaps half in play, go through rituals such as having to miss each dividing line between the

pavement blocks, in order to avoid misfortune of some kind, as for instance bad luck in school. These are magical acts to protect against dangers, against threatening powers within ourselves and outside. These dangerous powers are to be warded off or combatted in this magical fashion because they seem overwhelming, too strong to cope with by one's own strength.

The magical power which is invoked is the omnipotent power experienced in inner drives and needs and in the overwhelming powers around. The powers which are conjured up for protection are of the same order as those to be protected against. It is not the power of the ego's freedom which is called upon; but the autonomous, limitless powers within and without are invoked by incantation, ritual, and ceremonial. Many religious ceremonies, rituals, and beliefs, especially in more primitive forms of religion, appear to have a similar structure and function.

This leads to the second point which Freud considered. Religion—at least, this aspect of religious life—seems to originate in man's experience of overwhelming forces, powers greater than himself, and of his own helplessness face to face with them. Such powers had to be kept at bay or placated by magical means, or one had to be on their side by fulfilling what they seemed to demand. Religion, according to this view, originates in man's early feelings of helplessness; and his need for a powerful father, to whose demands he submits in order to enlist his help, brings forth the idea of God.

It is obvious that this view is one-sided. It takes into account only one aspect of primitive man's and the child's experience of himself in the universe: namely, the helplessness he experiences in his environment when he is not taken care of. But it does not take into account the feeling of oneness, of trust, and of belonging which also enters into religious feeling.

Nor has psychoanalysis considered that such experiences undergo, in the development of civilizations as well as of the individual, transformations of the same kind as the ones I described when I spoke of the integration of the ego. Religion was considered by Freud as a phenomenon which represented a rather primitive stage of the development of mankind; whereas it is, in its mature form, no more primitive than love is, even though both have primitive beginnings and some of the early, old elements remain and persist in maturity.

Freud, no less than other major representatives of modern science during the second half of the last century and the first decade of this, at least, took for granted that in our times science was to provide the answers and give the directions for the future to the major problems of mankind and their solution. They were to be rational answers, based on experimental and systematic research into what was considered the real world of facts, past and present; and it was on this basis that the future course of events, ideally, could be predicted and thus controlled.

Science, according to this widespread view, was taking over where religion and its irrational answers had failed. Mankind was progressing from a primitive state of animistic religion (where the universe was considered to be alive, animated by the same rational and irrational forces as man), through the stage of the higher religions (in which the powers and fundamental motive forces were personalized in an all-powerful God-father), to the scientific stage. Here, in the scientific stage, man had reached an adult point of view and action, had arrived at the acknowledgment of his own strength as an individual, as a rational being which sees reality as it is—not as it appears when we project our own needs and motivations into it, as in animism, or as it appears when we project all power and strength into a father-God.

This view is characterized by a strength and pride of spirit similar perhaps to the spirit of Prometheus or of Faust. Freud's expressed thoughts on religion carry this spirit. It is proud renunciation of the "consolations of religion"; man is on his own; he needs and asks no help from a God.

But while science was for a while very optimistic in its belief that it could and would provide ultimate answers and thus lead to final solutions —or at least completely rational solutions—of man's and the world's problems, science grew skeptical in the face of world events which shattered all expectations of rational control and progress. It began to appear doubtful that "reality as it is" is altogether rational: the question arose whether the scientific approach did not project man's rationality into this reality as before man's emotions had been projected into reality. Also it became doubtful whether man's dazzling rationality and its successes had not blinded him to the extent that he had neglected the irrational elements within himself. In fact, the rise of psychoanalysis itself is in part due to the growing awareness of just these problems.

Samuel Butler had already in the late nineteenth century summed up his skeptical view on science: "If it tends to thicken the crust of ice on which, as it were, we are skating, it is all right. If it tries to find, or professes to have found, the solid ground at the bottom of the water, it is all wrong." And he continues as follows: "Our [that is, the scientist's] business is with the thickening of this crust by extending our knowledge downward from above, as ice gets thicker while the frost lasts; we should not try to freeze upwards from the bottom." Referring to scientific rationality, he uses the words "ice" and "frost," and he warns against "freezing upwards from the bottom."

There is in these lines a note of wisdom beyond science, awareness of the limitations of science, and awareness of man's anxiety as the mainspring of the need for knowledge and science. Kierkegaard expresses this insight clearly for the science of psychology when he says that "the mood" of psychology is the anxiety corresponding to man's discovery of his sinfulness, of his fallibility.

Psychoanalysis and Religion

While psychoanalysis began and flourished first under the sign of scientific self-sufficiency, rejecting religion, it is possible from the vantage point of present understanding to see how psychoanalysis is itself an expression of the anxiety of modern man. Like other modern sciences, psychoanalysis (and psychology in general) is an outgrowth and manifestation of the deep concern of modern man with his own essential situation, not only in relation to nature, but in relation to himself and his—that is, the human—world as it has developed through the centuries of our civilization.

Freud, notably in his book, *Civilization and Its Discontents,* is only one of many who in the past hundred years have expressed their growing feeling and conviction that man has become estranged from himself, not only from the deep and secret sources of his existence, but also—and for that very reason—from his traditions, his institutions, customs, morals; in short, from the whole structure of the organization of his emotional, intellectual, moral, and spiritual life in society which we call a civilization.

Modern science, be it physical science or the science of man, is mainly genetic and dynamic in its orientation. The sciences today are not content with surveying, naming, creating order in their various fields and subjects of investigation. They endeavor to understand the development, the evolution, of whatever they investigate. And this, not merely in the sense of knowing and listing the various events and their sequence which led to the results we see, but in the sense of retracing, reproducing, the inner mechanisms of the developmental processes in question. And further, as is especially clear in modern physics but is equally true for dynamic psychology and psychoanalysis, structures themselves are understood in terms of process: processes as interrelated in a field or fields of action and motion in time-space. What appears stable and static is understood in terms of an interplay of forces which balance each other in various ways.

Applied to man, this means that the interplay of forces within himself, and the interaction between these forces in their interplay and the forces in the environment, from the very beginning of life, constitute what he is. His being, his essence, is process. Modern philosophical thought, as represented by such divergent figures as Whitehead and Heidegger, shows the same orientation.

Why is all science which is alive today taking the direction of dynamic and genetic research? Because modern man feels a deep urge to rediscover truth that has become stale and meaningless. We feel urged to re-examine, in the light and under the shadows of our own experience, which has moved into many new dimensions, the physical and the historical world around and in us. This takes the form of the questions: How have we become what we are? How can we *be* what we become? So also for the world in which we live.

The deep disturbance and anxiety of our age makes us feel that we can remain in touch and in communication with what is and what happens, and can continue our path, only when we trace back from what is now to the origins, and trace forward from the origins to what is now. Because what is now—and this applies particularly to our beliefs, standards, institutions, morals, and values—is in danger of dying from lack of living communication with its roots.

In searching for new ways to an understanding of and a meaning for existence, we will rediscover and re-experience much truth which is old truth; but it is old truth that will be felt and thought anew, and therefore will be called by new names and seen in new images and lived in new forms and ways of living.

I have tried to indicate how the dynamic and genetic orientation of modern science, and specifically of the science of psychoanalysis, is related to man's concern about himself in his world. If he is sincere with himself, he knows that there is much in the body of beliefs and knowledge, much in the institutionalized life which he has created for himself, that he no longer understands or underwrites, much that is no longer filled with life. Our interest here is with the fact that this is true for many of the formulations about human nature and about religious life.

The psychoanalyst, as a physician, sees the roots of emotional and mental disease in his patients in the early or later disturbance or disruption of trust and love, of the security of relationship and communication. And we begin to understand that the earlier and deeper these disturbances, the more they affect the very structure and character of the person.

In intra-uterine life the embryo is still in spatial, biological continuity with his environment, the maternal organism. He is biologically embedded in his environment, not quite differentiated from it. The event of birth, the cessation of this physical unity, creates entirely new biological conditions for the infant. On the one hand, it separates the infant from the restricted environment of the maternal organism. On the other hand, the infant is made part of a much larger and much more complex environment. At first the environment is mediated to the infant almost entirely, except for breathing, by the mother. This mediation, an interaction between mother and infant no longer based on biological processes alone but on behavior and activities, is the dawn of that which we call psychological.

Just as the biological organism grows and develops and becomes more and more independent of the mother organism through the incorporation, assimilation, and metabolism of food, which is an active process of the infantile organism, so does the psychological organization of the personality grow and develop through psychological incorporation, assimilation, and transformation of the moods, attitudes, general behavioral characteristics, and the abilities, interests, and feelings of those around the infant and child. They become changed, condensed, re-arranged, elaborated, magni-

fied and minimized, altogether molten and molded into what materializes as the psychological structure of the newly evolving individual.

Insofar as the needs and drives of the growing infant and child are frustrated or overstimulated by the environment; insofar as the psychological atmosphere in which the child grows up is overcharged with conflict, despair, and frustration, the result is inadequate or precipitous and generally disturbed development, to the detriment of the harmonious growth of the total person. Inner defenses against incongruous demands and pressures may take over where trusting forward motion should be. We see here the germs of faulty, immature, premature, inhibited, or in other ways disturbed psychological integration.

Yet, no growth process, no integration—biological or psychological—proceeds altogether undisturbed. Any growing being does not merely incorporate, assimilate, and transform into its own substance what it needs from the environment, but it also has to fight off and defend itself against disturbing influences. This very activity of self-defense, of establishing and maintaining and strengthening its own integrity against threatening forces, is an essential element of the growth process. Psychologically this means that there is, originally in the service of integration, always present conflict, danger, anxiety, fear. There is the need for warmth, care, closeness; and there is the drive toward emancipation as a separate being, toward integration as a new individual unit of existence. There is the drive toward others, toward togetherness and union with them; and there is the need for self-assertion and defense.

Faith and its vacillations and failure have their roots in the early ties and bonds and their disturbances or disruption. And the development of the ego brings the individual to integrate them into higher feelings and concepts of his relatedness and belonging, and their counterparts.

The omnipotent, blind power of unconscious drive and need, experienced first as omnipresent and timeless, changes gradually, through the integration with an environment of much higher organization, to become the more free, seeing relatedness of trusting interdependence and love, and its modifications of distrust and clinging. As the unconscious becomes transformed into ego-freedom—and this is a process which in healthy development continues throughout life—the images and concepts of this relatedness also change to higher forms. The deepest inner knowledge of such relatedness is the experience of relation to a universal being.

The images and concepts of God and of the bond and the gap between God and man undergo similar transformations, in the history of a civilization and in the history of the individual as a member of his civilization. The mature individual, being able to reach back into his deep origins and roots of being, finds in himself the oneness from where he stems, and understands this in his freedom as his bond of love with God. The concept of God itself seems to change from that of a blindly omnipotent power to

that of the transformation and incarnation of such power in individual freedom and love.

For modern man, who has surrounded himself so overwhelmingly with a man-made world, it is more and more difficult to experience himself in his relatedness to the living universe, except through other men who are in the same predicament. This increases the anxiety of unrelatedness of which I spoke earlier.

The transformation and organization of the unconscious into ego, into an individual self, is a continuous process. In the development of the ego's freedom of choice, the self becomes free to take this process over as a task for which it is responsible. Kierkegaard, in his essay on "Repetition" (which he calls an essay in experimental psychology), speaks on this phenomenon of transformation into a self which the self chooses to actualize. Repetition, he says, "is the modern life-view." "When one says that life is a repetition one affirms that existence which has been now becomes."

Psychoanalysis, in an effort to understand the present life of the individual, the life that now becomes, and how and why it goes astray, analyzes the existence which has been—not only, however, the past as we know it from our conscious memories and recollections, but the past in the sense of past stages in the process of transformation of the unconscious in us, stages which are buried, as it were. Such stages of the process of transformation or repetition, dependent as this process is on the interpersonal relations and their usefulness or destructiveness, may be focal points for disturbed further development. They may be stages from whence repetition has gone astray.

It is noteworthy that Freud, later in his life, also arrived at the concept of repetition. Even though his concept of the repetition compulsion, inherent in life, comprises many heterogeneous elements, one of the sources for his concept is his observation that the child's play, and later man's life-work, is a continuous repetition of past experiences. This is meant in the sense that it is a repeated attempt at and process of mastering and reworking our formative experiences. "Existence which has been now becomes."

Seen in this perspective, psychoanalytic treatment is a collaborative process of repetition. It is a reworking, "in the presence of the beloved physician," as Jung has said, of life-stages with which the patient has not come to terms, so that, from those stages on, life in all or in some of its various relationships and manifestations has gone astray.

With the overwhelming majority of patients there is no danger of destroying or inhibiting their genuine religious feelings and beliefs. The problem is to help them to a stage in their development where they can begin to be spiritual beings, so that whatever their religious beliefs may be can become meaningful. Psychoanalysis then can let them go on their way.

No psychoanalyst who understands anything about himself and his work would, no matter what his own beliefs may be, want to destroy or nip in their buds those early, and in the true sense liberating, childhood experiences and memories which contain the germs of genuine religious experience. Psychoanalytic treatment, as an educative or re-educative process, implies and appeals consistently to the ego's potentiality for growth; that is, it appeals to the individual's freedom to repeat. This, in its highest form of awareness, is the freedom for faith and love.

THE CHRISTIAN ROOTS OF PSYCHOANALYSIS

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A Question of Responsibility

In 1948 a book by Dr. Paul Tillich of Union Seminary, New York City, was published. He wanted to call the book "The End of an Era," but the publishers were concerned that such a title would not go over very well. People are not especially interested in the end of their own era, and this is what Tillich meant. The publishers therefore persuaded him to give it another title. This he did by calling the book *The Protestant Era.* This was a bit more subtle, and the publishers accepted it. Many of us agree with Tillich that this moment in our history is a moment between two eras.

The relationship between psychoanalysis and Christianity can be studied helpfully on several levels and to real advantage. Both are concerned with the health of the individual; and in this there can be a great deal of understanding, agreement, and cooperation. As Dr. Mollegen pointed out, there are many of us in the Church who are deeply appreciative of psychoanalysis, and some of us are doing all we can to make its insights available and relevant to individual Christians, and to theological students and the clergy in particular. There are of course large numbers of people in both camps who regard one another with considerable suspicion, but the general trend is toward mutual understanding and cooperation. On this level the Church is more on the receiving end.

But the relationship between psychoanalysis and Christianity in terms of our moment in history is not so easily worked out. Dr. Weigert mentioned that one of the purposes of the psychoanalyst was to "free the sources of spontaneity and creativity from the shackles of a distorted de-

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Adapted from a lecture presented in Washington, D. C., May 13, 1952, the fourth in a series entitled "Christianity and Psychoanalysis." The entire series of four lectures and panel discussion was published by the Organizing Committee, Christianity and Modern Man, with authorized recording and production by the Henderson Services, 1029 20th Street, N. W., Washington 6, D. C. This publication may be obtained from the Henderson Services at a price of $3.00. Further information concerning the aims and publications of the Organizing Committee of Christianity and Modern Man may be obtained from Mrs. David D. Lloyd, 2501 Ridge Road Drive, Alexandria, Virginia.

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velopment."[1] Christianity rejoices in this. We would like more of it for ourselves and for our fellows. But toward what are the creativity and the spontaneity to move?

Dr. Weigert understands, I believe correctly, that this is a problem of goals. She indicated that this was theology's rightful interest, but stated that psychoanalysis is more oriented to the removal of distortions which come between a person and his goals. Most of the other analysts I know would agree with her also that as far as the goals are concerned "we are all deeply anchored in our individual and group-determined systems of values." The question, then, which I wish to raise and with which I am deeply concerned is: What responsibility do psychoanalysts as individuals, as schools of psychiatry, as psychiatric and psychoanalytic organizations, take in developing, maintaining, or changing individual and group-determined systems of values?

One often feels that analysts assume that, given the removal of distortions in a person, he will automatically and naturally choose worthwhile and valid norms and values, and that historically significant and enduring human community will follow. This can be supported by a great deal of evidence. There are an increasing number of men and women who have had their anxieties and their compulsions reduced to manageable proportions by way of psychotherapy and are living productive, creative, and useful lives.

An analyst friend of mine related the following about himself. He had been reared in the Church, and was casually involved with religion until his junior or senior year in college. At this time he declared his independence of the Church. He lived increasingly outside the moral code of the Church. He went to medical school, and after a time became interested in psychiatry. He then underwent analysis and is now a practising analyst. His final comments were that he was now living a more nearly moral life than ever before; that he was faithful in his marriage relationship and happy with his children; that he was actually living (and these are his own words) more nearly according to the Ten Commandments than during those days when he was outwardly a part of the Church. He now felt no need for the Church in any way and did not intend to offer his children any specifically religious instruction.

My analyst friend would probably agree that the norms and values by which he is now living were originally worked out in the tradition of a particular group of people—namely, the Hebrews and the Christians. But he would also feel (I think) that the divine part of the tradition was important only to the extent that it was useful to man in his earlier stages of development, and that now, having arrived at this high level, he might as well wean himself away from dependence on the idea of a living God.

[1] Edith Weigert, "The Psychoanalytic View of Human Personality," *Journal of Pastoral Care,* VI (1952), No. 4.

It is at this point that Christianity and psychoanalysis find meeting difficult. Christianity affirms that man is now, always has been, and ever will be dependent on the living God who revealed himself to Israel. We believe that it was God's revelation of himself and a particular people's response to this revelation which brought man to his present potentialities. We believe further that, when a people cut themselves off from this living God and declare their independence, they sooner or later fall into the service of a lesser god—a lesser group loyalty—and that their latter state thereby becomes worse than before the living God ever spoke to them.

But the trouble is that this is obviously not the case with individuals. We can name large numbers of individuals who have cut themselves off from the church or synagogue and are getting along fine. And because we cannot see this worse state happening in individuals, we logically can assume that the same is true of a people. At this point it is probably Protestantism that should go into sackcloth and ashes, since it is the Reformation that is largely responsible for this particular illusion of individualism in regard to group relationship. It is a comparatively new notion in the Western world that a group is an accumulation of separate individuals rather than a people bound together in a community of meaning.

Martin Buber, in his book, *I and Thou,* has stated the problem somewhat cogently for our purposes here:

> The true community does not arise through peoples having feelings for one another (though indeed not without it), but through first, their taking their stand in mutual living relationship with a living Centre, and second, their being in living mutual relation with one another . . . The community is built up out of living mutual relation, but the builder is the living effective Centre. (P. 45)

My thesis is that psychoanalysis appeared in a Hebrew-Christian culture because no other cultural soil could produce it, and further that it will always be dependent on such soil.

The Psychiatrist's Training

If psychiatry is rooted in the Hebrew-Christian religion and derives its norms and values from it, certainly most psychiatrists do not talk about it. Could this be a part of psychiatry's unconscious which might well be brought into awareness as a fact to be dealt with in its own continuing integration and in its responsible relationship to society and history?

It is not difficult to understand why psychiatrists would often find it strange to believe that their theory and practice are rooted in Christianity. Perhaps it is the same kind of unbelievableness which a patient faces when an analyst points out to him the connection between a given symptom and some unconscious dynamic. As things meet the eye, one would not quickly see the connection.

Psychiatrists are trained first as medical doctors. The exacting discipline of medical studies leaves little time for tracing the philosophical foundations and implications of medical theory and practice. The world of things is the medical student's preoccupation, where the only symbols are singularly related to specific material entities such as stomachs, germs, blood, and so forth, or to chemical formulas where mathematics can be exact. This is medical school, but psychiatry is quite different.

If the would-be psychiatrist has not up to this time found himself interested in philosophies and world-views, he must now make a philosophical decision, although he may not recognize it as such. Having completed his medical training, he now must choose between the different branches of psychiatry, and his choice in the last analysis will be a philosophical one. He may choose to be an organicist, and on this basis proceed to interpret emotional and mental illness in terms of glands, body chemistry, constitutional factors, brain structure, etc. In this decision he has chosen to believe that man's soma is more basic, more real, and more decisive in man's life than is his psyche. He has joined himself knowingly or unknowingly to a very particular philosophical school which might best be described as naturalistic materialism. Or he may choose to become a fairly orthodox Freudian; and again he has made a decision which will influence tremendously what he observes in and what he does with people.

The abundance of "scientific evidence" which each school or sect of psychiatry is able to bring forth to support its particular theory witnesses more to the power of the philosophy underlying it than to the objectivity of the evidence, since the facts being observed are always constant. It is the inevitable philosophical assumptions underlying the interpretation of the facts which are variable.

Those psychiatrists who move beyond the organic level of interpretation find themselves confronted with less tangible entities. These psychiatrists see man as psychosomatic. Further, this psychosomatic man cannot be studied simply as an isolated unit, but rather the intricate involvement of his life with other people and with things must be studied also. *Now* psychiatry is seen to involve the whole man and his relationships with others and with the world of things.

In this decision to see man from the point of view of his interpersonal relationships, the psychiatrist has chosen to believe that the psyche is the more decisive part of a person, and in general the behavior of the soma is interpreted as symptomatic of what is going on in the psyche. Those who choose to interpret psychiatry from this point of view are called functional psychiatrists. Those who choose the former point of view are called organic psychiatrists.

Once the young doctors have chosen the functional interpretation, they often become interested in looking inside themselves and studying their own relationships with others. This very often leads to their re-

ceiving psychoanalytic treatment. Usually a few years pass during which, as another analyst friend of mine has said, they are busy setting their own houses in order. They have slowly moved into a new world. They are working with patients and are experiencing an expanding insight into the complexity of life.

Some of them settle down at this point and do an admirable job of helping people with personal problems. Still others begin to wonder what this whole process of life is about in a more ultimate sense. The age-old questions slowly emerge, and finally they ask with more seriousness and from a greater depth than ever before, "Why are we here? What is the meaning of life? What is the purpose of all this?" Having arrived at the end of their discipline—the whole man and his relationships—they see that there is something more. There are tomorrows for the individual and the group. There is the whole human race and its history.

By this time the psychiatrist often looks at Christianity again. It is the dominant religion of his own culture. Having just emerged from the depth of his own personal and interpersonal experiences and investigations, he is confronted with the Church's same old language and symbols. He hears the same old words he heard as a child in Sunday school or synagogue. The freshness of his own experience and insight makes him resent the seeming unrelatedness of Christianity. He may also feel justified resentment, for he has treated wounds inflicted by institutional Christianity or has perhaps brought health where the Church's therapy did not heal.

He may look briefly into other religions—maybe the grass seems greener. He usually decides that he is a "humanist." He feels warmly toward man. He has found a way to relieve many individuals of their suffering. He has seen the need for a moral and ethical framework. He may say that he is an eclectic religionist, i.e., he chooses to select the noble, brave, and true from all human endeavor of all cultures and religions and to combine them into one grand moral and ethical system.

He may now decide to have a chat with a clergyman some time, or to attend a church service again. He may find a minister who is "liberal" theologically. This means that what he hears will be largely highly ethical and moral and in general intellectually respectable. There will be some references to God and to Jesus Christ, but as a rule the minister will be prepared to define and describe God and Christ in such a way that even a bright young psychiastrist would not be too offended. However, the psychiatrist will in most cases feel that, if Christianity is chiefly high ethics and morality, he can be quite moral and help others to be quite moral without dragging in archaic religious verbiage. A few, however, may feel that in such a church they can participate somewhat regularly and in this way contribute to a cultural institution of merit.

On the other hand, the psychiatrist we are speaking of may attend a church or meet a minister with a fundamentalist view of religion. (There

are church fundamentalists as well as Bible fundamentalists.) There will be no meeting of minds as a rule, since the obvious authoritarianism and intellectual straitjacket of this particular brand of religion will make a real sharing of ideas quite impossible.

Lastly, the psychiatrist may meet a clergyman who is neither "liberal" nor "fundamentalist." In all likelihood this will surprise the psychiatrist. There will be no immediate meeting of minds and no immediate marriage of the two disciplines, but there may be an interesting willingness on the part of both the clergyman and the psychiatrist to converse with each other with a certain degree of openness. The meeting will usually lead to further conversations.

Since most of us in the theological section of the group participating in this series fall into the last category—neither fundamentalist nor liberal (we prefer to use the term "classical Christianity")—the remainder of this paper will treat the subject largely from that frame of reference.

The Greco-Christian Matrix of Science

The classical Christian position generally holds what Dr. Tillich has described as "catholic substance and protestant spirit"—that is, it holds the traditional formulation of Christianity as worked out in the Old and New Testaments and in the first few centuries of Christian history, together with the spirit of self-criticism and reform as first found in the Prophets of the Old Testament and again in the Protestant Reformation.

These two principles create a situation of tension which keeps us loyal to a central belief on the one hand that God has revealed himself and the nature of his relationship to men and to the world of things, but on the other hand that the formulation and understanding of this revelation is never beyond critical examination and refinement. In fact, the Protestant spirit demands that any new light born of science or any other source must be brought to bear upon this historic revelation. The Protestant spirit demands that this historic revelation be recast in terms of changing categories of thought and be made relevant to each age in terms of the age's peculiar categories of perceiving reality.

As Dr. Loewald has indicated so clearly, Freud was in the early days of his work a pure scientist.[2] His interpretation of mental illness was almost biologically oriented. Therefore we might be inclined to say that this certainly could not be called a Christian root. However, there are those of us who are persuaded that science itself is the peculiar product of the Hebrew-Christian revelation. When our Lord was leaving his disciples he told them that he would send to them (not only as individuals, but more particularly as a special group—the Church, or the new Israel) the Holy Spirit, and that the Holy Spirit would lead them into all truth. He said

[2] See Dr. Loewald's article in this issue.

further that his disciples would in the future do even greater works than he had done.

Most of you are familiar with the dualism of Greek philosophy. Greek philosophy itself was built upon the foundations of earlier Greek religion. The dualism of the Greeks was based on the belief that anything material fell under the fate of death. This was observable in all earthly nature. Like all Oriental and pre-Hebrew-Christian thought, Greek philosophy held that the faithful cycle of nature (birth, growth, procreation, decline, and death) is ultimately under the power of death.

The highest reaches of Greek philosophical endeavor and rational thought had not been able to rise above the fact of death and the circular fatalism of nature. Therefore, if there was anything that survived death, it obviously could not be involved with the material and with the natural. The real and abiding was therefore the abstract. This was the ultimate. This was the absolute. And this was always divorced from the material. The only incentive, therefore, to investigate the material and the natural was the desire to find clues to the abstract. The pure form "in the heavens" was thought to be reflected only in a distorted way in the material. The material itself was under the power of fate and death.

It was into this world of Greek thought, which had already fallen from its grandeur into fatalism and despair, that Christianity—like an orphaned infant rejected from its own family, Judaism—was sent out to grow up or die. The Church wrestled violently with Greek thought. (When philosophical and religious convictions of two groups are in conflict, particularly in the transitional moments of history, people play for keeps.) Christianity's victories and partial victories, which were very expensively won, are recorded faithfully in the New Testament and in the first several ecumenical councils of the Church.

The simple statements of the Apostles' and Nicean Creeds, so strange to twentieth-century ears, are as a matter of fact more a part of our history than the Declaration of Independence or the Constitution, for the creeds point to the basic truths which in time overthrew the Greek's low evaluation of nature and material things and made possible a friendly interest in them, thus laying the foundations of Western civilization. The Christians insisted that one God had created all things and had created them good. In the first chapter of the Hebrew-Christian Scriptures, God said to his newly created man: "Be fruitful, and multiply, and replenish the earth, and subdue it: and have dominion over the fish of the sea, and over the fowl of the air, and over every living thing that moveth upon the earth . . . And God saw every thing that he had made, and, behold, it was good" (Gen. 1:28, 31).

The Christians further taught that this same God had taken humanity upon himself in the Jesus of Nazareth who lived and suffered and died in history; and further that this man had risen from the dead, not only

as a spirit, but as a spiritual *body*. The Christians further believed that every man's body was an essential part of his total person, and created good, and would one day be resurrected. (They were careful to define the resurrected body as different from the body we now know, but they refused to part with the conviction that man is essentially body and spirit.)

In these three central affirmations, *creation is good, God became man,* and *the resurrection of the body*—Creation, Incarnation, Resurrection—the people of the new Israel, the Church, finally began to break the chains of Greek dualism and fatalism. (Greek dualism does not, however, die easily, and we are still struggling with some of its claims to this very day, in such things as Christian Science or some of the other brands of Christianity which try to split man up the middle by saying that the spirit is the wonderful thing about man and the body is the thing that, as we used to sing in the old hymn, we're going to shake off when we rise to Mt. Pisgah's lofty heights. We still have some work to be done in our fight with Greek dualism.)

By the time of St. Francis of Assisi nature was for the first time viewed with a warm and friendly eye in the non-Jewish world. It was not simply romantic that St. Francis felt kinship to nature, rather it was a deep insight into man's potential and real relationship to nature. The brilliant and unrivaled logic, insight, and philosophy of Greek genius was bound by its own chains until freed by Christian revelation. Now the truth had broken through. When the high rationalism of the Greek was integrated with the Hebrew-Christian revelation about creation and nature, science was born. Some of us believe that it was no accident that Roger Bacon, one of the first empirical scientists, was a Franciscan friar. Of course, whether or not science *could* have been born outside Christianity cannot be proved. The facts are that it is strictly Western and that it happened in the midst of a Christian culture. In the last analysis, to believe this or not is a matter of faith.

Psychoanalysis and Our Value-Systems

Beyond this Christian root of psychoanalysis, however, is the matter of individual and group-determined values which are so strong a part of all of us. Obviously my analyst friend of whom we spoke earlier ended up living more nearly according to the Ten Commandments because these are still the underlying norms and values of most Western people. And this returns us to our earlier question: What responsibility do psychoanalysts shoulder as individuals, as schools of psychiatry, as psychiatric and psychoanalytic organizations, toward developing, maintaining, or changing the individual and group-determined systems of values in which they operate?

I recently listened with great interest to a psychiatrist who had made an intense study of many of the Nazi war criminals brought to trial in Germany after the war. He stated that Germany had conducted a costly

experiment for mankind. The experiment had shown conclusively for him and for many that science is strictly a tool of a people. Its use depends upon the values and the norms of the people, and the values and norms depend upon the god the people serve.

He stated further that there was very little guilt present in those who were active in the gruesome atrocities. This he accounted for by the fact that the group-determined values supported them at the time. In other words, the consciences of a great number of people had been re-ordered and re-arranged around a new center. Tillich has described religion as being "unconditionally concerned." In this instance the Nazis made their unconditional concern (their religion) Hitler, the German State, and the German people. Nazism now became the norm, and the human conscience—always true to its real god—became a Nazi conscience.

This phenomenon—the re-ordering of a people's conscience around a new center—is what the Hebrew-Christian tradition has always meant by idolatry. Idolatry is not simply the making of images from sticks or stones. Idolatry is the elevation of any thing, person, people, or idea to that ultimate and immanent center which belongs only to the living God.

The Nazi experiment was the more diabolic because the Nazis were not like the Greeks, who did the best they could, but rather they were at one time a Christian people who themselves had been led by earlier Christians from barbarism into becoming a most creative people. An analyst who left Germany during the Hitler regime has stated that it was impossible to practise psychoanalysis there because Nazism and psychoanalysis were incompatible. The same is obviously true of the Communist world. Psychoanalysis would hardly go over too well among the Moslems, either, whose religion is beyond critical investigation.

It is my conviction that the riches of Greek philosophy and culture were saved not because of their own power to save themselves, but rather because their value was received and baptized by Christianity—and by classical Christianity at that. If the going in world history gets much rougher and the citadels of political democracy should fall, I for one am confident that psychoanalysis would survive, not because of its power to save itself, but rather because Christianity is acknowledging it and is baptizing it into itself.

There is a mental condition familiar to all of us which will make a useful analogy at this point. We all have known something of people who have had amnesia. Laymen have read about them in newspapers and psychiatrists have worked with them in hospitals and clinics. One thing is always true: Little can be done for the amnesia victim until he himself actually begins to remember. This is also true of whole peoples and groups. Remembering Pearl Harbor helped to keep a whole people stirred up and in fighting spirit throughout the last war. Remembering 1776 by our annual Fourth of July is designed to keep alive in us our Americanism.

I think it is quite safe to say that, when a people or a group fails to remember where they came from, their old center slowly or quickly slips away and they are lost to another center. Remembering with reverence where we came from has a great deal to do with where we go. Jews cease to be Jews when they forget the Passover as a central part of the meaning of their present living. Americans cease to be Americans when they forget 1776 or Thomas Jefferson or Abraham Lincoln.

At the heart of Christianity is the sacrament of Holy Communion, and one of the central acts of this service is an act of remembrance in which the past is brought forward as today's norms and values. When St. Paul said, "I am determined to know nothing among you save Jesus Christ and him crucified," he was not demonstrating an arrogant attitude toward knowledge. Indeed, he was a most profound thinker. He was simply saying that Jesus as the Christ was that fact in history in the light of which he interpreted all things. This was the point of reference from which all norms and values—all judgments—were made.

At first this sounds presumptuous, but the fact is that this is what we all do all the time. Our observations are always in the context of our subjective system of values and norms. As individuals in America today we can forget the living Center of our norms and values because there are still many people who do remember. Those who forget and accept the norms without accepting the Center can in my opinion live rich and beautiful lives. But, unfortunately, it is something like mistletoe: As long as there is more tree than mistletoe, everything is fine, but when there is more mistletoe than tree the tree dies, and shortly thereafter the mistletoe dies also.

Of course, to remember for the sake of remembering is just another form of idolatry, and the Church has a great deal of clinical statistical data about that. There are some patients in psychotherapy who may resist help by quite effectively remembering and cherishing the past in such a way as to deliver themselves from facing the present and future. This has been graphically described as "hugging one's neurosis." But having said all of this, one must still ask: What do the psychoanalysts as individuals and as groups remember?

It occurs to me that psychoanalysts remember humanism, and in this Christianity rejoices. Psychoanalysts also remember the exacting demands of science, and in this Christianity rejoices. Psychoanalysts remember honesty, and in this Christianity rejoices. Psychoanalysts remember that the outside of the tomb may be whitewashed and cleaned, but that inside there are often decaying bones. Christianity at its best rejoices in this, its own baby, and in many quarters is grateful to psychoanalysts for bringing this again to our attention in a sometimes painful but clarifying way. One could go on for pages listing the things which psychoanalysts and psychoanalysis remember in which Christianity rejoices.

But Christianity might liken many psychoanalysts to electricians who remember well and are effectively skillful with the intricate electrical equipment of, say, Washington's central telephone office, but who assume or believe that the electricity is self-contained in the intricate wiring—that is, electricians who deny or are agnostic about there really being a power plant. Christianity might liken other psychoanalysts to other electricians who believe that there is a power plant but that it is not yet found or that it will never be specifically found.

Christianity affirms that God has revealed himself already in Jesus as the Christ, the Messiah. This is the point at which classical Christianity and most psychoanalysts are apt to separate. This problem of Jesus as the Christ—that is, God incarnate—is the same today as it was in St. Paul's day. To the Jews it was a stumbling block, and still is. To the Greeks it was foolishness, and to the intellectuals of today it still is.

I am constantly amazed at the remarkable and deep insights of the people who produced the Hebrew-Christian Scriptures. In the Old Testament there are seventeen passages which refer to the children of Israel at various times "whoring after other gods." For a long time this to me was just a rather vulgar but clever and poetic way to get a point across. However, I am now struck with what psychoanalysts have to say about whoring after anything. I know of no reputable analyst who would regard sexual promiscuity as insignificant and unimportant. On the contrary, psychoanalysts would assume that this was most significant. Promiscuity is regarded as a symptom. The sickness behind the symptom usually involves hostility, lack of self-respect and thus incapacity to respect others, and finally has something to do with what Dr. Weigert called "trust," which as she stated is the basis of genuine faith.

Please do not misunderstand me. I would not die for what I am about to say, but I confess that I am quite intrigued by the following analogy. If Christianity is in a very real sense the marriage partner of psychoanalysis in the same way that God was the marriage partner of Israel. then we can say truthfully that Christianity as institutionally experienced (being institutionally human) has not always been a good mate. Functional psychiatry today is quite in search of a good mate. Here on the East coast, analytic and psychiatric organizations and individuals have been wooing and have been wooed by an interesting collection of suitors, including an Indian swami, a Buddhist priest, ethical culturists, Aldous Huxley, and, I suspect, many others.

The language of the Old Testament is a bit crude, but the analogy in my opinion is not altogether inappropriate.

Theology's Mediating Task

In conclusion I quote three paragraphs from Paul Tillich. The first two are from *The Shaking of the Foundations* and the third is from *The*

Protestant Era. I might add, lest this paper has made any Christian feel quite smug and we-have-the-answerish, that the following words of Tillich's do not speak comfortably to those who believe too easily or for whom the Christian answer is more of an LP record than a deep conviction purchased at great price.

> Today a new form of this method has become famous, the so-called "psychology of depth." It leads us from the surface of our self-knowledge into levels where things are recorded which we knew nothing about on the surface of our consciousness. It shows us traits of character which contradict everything that we believed we knew about ourselves. It can help us to find the way into our depth, although it cannot help us in an ultimate way, because it cannot guide us to the deepest ground of our being and of all being, the depth of life itself.
>
> The name of this infinite and inexhaustible depth and ground of all being is *God.* That depth is what the word God means. And if that word has not much meaning for you, translate it, and speak of the depths of your life, of the source of your being, of your ultimate concern, of what you take seriously without any reservation. Perhaps in order to do so, you must forget everything traditional that you have learned about God, perhaps even the word itself. For if you know that God means depth, you know much about Him. You cannot then call yourself an atheist or unbeliever. For you cannot think or say: Life has no depth! Life itself is shallow. Being is surface only. If you could say this in complete seriousness, you would be an atheist; but otherwise you are not. He who knows about the depths knows about God.[3]
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> But *the task of theology is mediation,* mediation between the eternal criterion of truth as it manifests itself in the picture of Jesus as the Christ and the changing experiences of individuals and groups, their varying questions and their categories for perceiving reality. If the mediating task of theology is rejected, theology itself is rejected; for the term "theo-logy" implies, as such, a mediation, namely between the mystery, which is *theos,* and the understanding, which is *logos.* If some biblicists, priests, evangelicals, and lay Christians [and for our purposes we would add, psychoanalysts] are opposed to the mediating function of theology, they live by the crumbs falling from the table of theological tradition which has been created by the great mediators.[4]

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[3] *The Shaking of the Foundations,* pp. 56-57.

[4] *The Protestant Era,* p. xiii.

THE CONTRIBUTION OF THE SOCIAL SCIENCES TO MENTAL HYGIENE

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THE answer to the question, what contribution the social sciences can make to the problems of mental health, depends on our concept of mental health. For the purpose of this discussion I want to differentiate between two concepts of mental health.

Mental health, in the first place, is *adjustment* to the norms and habits of an existing society; mental illness is *maladjustment*. From this relativistic standpoint any given culture is assumed to be normal, not only in the statistical sense, but also in the *normative* sense of being good and desirable. The second concept of mental health is based on the assumption that the nature of man, in spite of all differences, is the same in all cultures, races, and historical periods; that the same laws govern him not only physically but also psychologically and that certain values and *aims* for his development follow from his nature. Any society that is conducive to man's development toward these goals, which is furthering life, is *good;* any society that blocks this development and obstructs the unfolding of life is evil. Any culture must be judged from this criterion; it is not good because it exists and has power, but only if it fulfills the function of making man more human. Needless to say, there is no necessary or absolute contradiction between adjustment and the striving for these human goals. It is a relative contradiction which varies according to the approximation of any given culture to the aims of humanity.

From this position mental health is not the same as *adaptation* to society, but it is to be defined *objectively* as the state of mind which is in accordance with the nature of man and the goals and values which follow from his nature. Just as a society in which the majority of people suffer from tuberculosis is not for this reason a society of healthy people, a culture in which the majority of people fail to realize the aims of humanity is not

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An address from the Plenary Session, "Contribution of the Various Professions and the United Nations to Mental Health," December 12, 1951, IV International Congress on Mental Health, Mexico.

Reprinted from *The Massachusetts Association for Mental Health News Letter,* June-July, 1952, with permission of the Massachusetts Association for Mental Health, Inc.

a culture conducive to mental health. Moreover, there seems to be ample evidence for the assumption that man's character structure is molded by the organization of society, its mode of production and distribution, its social and political structure, its ideals and values stemming from its practice of life. *From these premises the conclusion follows that mental health is primarily a social, economic, political, and ethical problem and hence one which can be properly approached only by the cooperation of all social scientists.*

I want to show more concretely why I believe that, especially at the present moment, the goals of mental hygiene require a thorough and critical appraisal of our social structure and culture and hence such cooperation of all social sciences.

The premise of the following considerations is the thesis that our contemporary Western society, in spite of its material, intellectual, and political progress, is increasingly less conducive to mental health and tends to undermine the inner security, happiness, reason, and the capacity for love in the individual; that it tends to turn him into an automaton who pays for his human failure with increasing mental sickness, and with despair hidden under a frantic drive for work and so-called pleasure. I propose that those concerned with mental hygiene must examine whether this assumption is borne out by the facts, and, if so, what are the causes for modern society's destructive effect on mental health and which social changes are necessary for a sane and mentally healthy life.

There is widespread agreement that the dictatorial systems which have emerged in the last decades are destructive of mental health. Indeed, who can seriously doubt that a life of fear, of intellectual subservience, of mutual distrust must be destructive of mental health. But while this seems obvious to most people, the same people still share the naive optimism that better machines plus shorter working hours plus greater material comfort plus political freedom are not only necessary, but sufficient, conditions to ensure mental health.

What is *in fact* the *human situation* in contemporary Western society?

Man has become a commodity. He is not only busy selling commodities and services, his chief interest is to sell himself. His aim is to become a success, not as a human being, not by developing reason, love, or his artistic capacities, but by developing the kind of personality which is in demand on the personality market. He has to have the feelings and ideas which are not contrary to anyone, he has to develop a "pleasant personality," whose *opinions* are always up-to-date, and who has no *convictions* and no doubts. His sense of self-respect and value depends on his salability, his success; hence he is always insecure, haunted by inferiority feelings, dependent on others' approval, on changing personality fashions. This orientation is hardly avoidable in a culture where the production of things has become the main aim of human effort, an end in itself, and not a

means for a more human life. Being chiefly concerned with selling things and making a profit, *man has become a thing himself.*

But do we not find a great deal of enjoyment and pleasure in modern culture? People listen to the radio, go to the movies, look at television, and so on. Only the superficial observer will find that these activities are a genuine expression of pleasure. They are to a large extent a compulsive and frantic attempt to escape from inner emptiness; they are symptoms of the inability to be with oneself—or, for that matter, with anyone else, without the protection of such escape devices. Man wants to have leisure time, but he is afraid of it when he has it—and tries to kill it. There is a curious contradiction in his character: His work is compulsive because he has to prove his human worth by success; but as compensation for his obsession with work he has developed an extraordinary craving for laziness. We are obsessed with a desire for *pushbutton-power* with the wish to achieve great results without effort, by twisting a dial, or moving a gear shift.

This too results from our practice of life. Man spends most of his energy in a kind of work which in itself is meaningless to him. Whether he is high up or at the bottom of the social ladder, he is a cog in the machine, whether he feels consciously powerless and insignificant or whether he has to hide an unconscious feeling of insignificance and human impotence by having power over others, or being important. Whatever his position is, he is filled with a deep indifference toward his work which makes him a prisoner and absorbs his best energies, without making him happy. He is indifferent to, and often unconsciously hates, his commodity, his customers, his competitors, his superiors, and those below him—and, most important of all, he hates himself. He is politically free and can vote for his representatives. This is indeed an important achievement, and further progress depends on its preservation. But it is not enough. When people lack critical judgment and sound information, how can their act of choosing be meaningful? Moreover, we do not have the social and political arrangements to give the individual citizen the possibility of participating effectively in making political decisions. This is left, like most other important decisions, to the *specialist,* the political specialist, who feeds the individual with the illusion that it is he, the voter, who makes the decisions. We do not develop political intelligence and responsibility because there are no effective ways of active participation—and one must not only think before one acts, *one must also be able to act in order to think.*

We still profess to the traditional ideals of Western culture. But modern man rapidly becomes an automaton, living without love and without faith—without love not only for others, but without love for himself, without faith in life and without faith in his own powers. Who should know better than the psychiatrist where this situation leads? Mental illness is caused by inability to relate oneself to others, by lack of faith and integrity; if this inability to relate oneself reaches extreme proportions, the result is insanity. There is no need to quote statistics on the extent of mental illness in modern culture. But even the great number of normal

people is no comfort. Many of them are normal because they are so well adjusted to our mode of life that their human voice has been silenced so early in their lives that they do not even struggle or suffer or develop symptoms, as the neurotic does. Indeed, let us beware *to define mental hygiene as the prevention of symptoms.* Symptoms as such are not our enemies, but our friends; where there are symptoms there is conflict, and conflict always indicates that the forces of life which strive for integration and happiness are still fighting.

While we still hang onto the illusion of individuality, we are moving rapidly toward an age of uniformity. Not only commodities are mass fabricated, but also opinions, feelings, our tastes. A society in which the individual has no care from where his peculiar feelings and convictions stem is bound to be manipulated and directed by a centralized authority, regardless of the political ideology which is employed. Indeed, *uniformity and freedom are incompatible. Uniformity and mental health are incompatible too.* Man is not made to be an automaton, and, if he becomes one, the basis for mental health is destroyed. It is one of the most significant insights of modern psychology that mental health is rooted in man's ability to make productive use of his powers; if he is blocked in this, he is sick, whether his sickness manifests itself in symptoms or whether it is hidden under the frozen mask of complete adjustment.

I cannot end this criticism of modern society without adding a remark which should correct the obvious one-sidedness of this criticism. Not only have I omitted to mention certain positive aspects of contemporary culture, I have also not mentioned the fact that many, if not most, cultures of the past have been equally or more destructive to mental health. Every society, past or present, which is built on force, which condones the exploitation of man by man, which rewards aggression and destructiveness, corrupts man; it corrupts the one who wields power as much as the one over whom he rules. Human relations which are based on power and exploitation are contrary to the requirements of human nature, they create fear and insecurity and result in mental sickness. Human relations built on love and respect are not just a religious and philosophical ideal. The study of neurosis proves empirically that they are the necessary condition of sanity.

What, then, is the task of those concerned with mental hygiene?

The tasks which the mental hygiene movement pursues at present are necessary and significant. But I believe that beyond those tasks a thorough criticism of our practice of life and our social structure is necessary. Specifically, I propose two tasks:

1. To investigate in detail the problems which matter in this respect. What do we know, for instance, about such significant questions as these: Are people happy? (And by this question I mean whether they *are* happy, and not whether they think or say they are happy, as the public opinion polls are trying to find out.) What values and ethical norms do really, and not fictionally, determine their actions? What meaning does work

have for them? What is their capacity to love, as differentiated from sexual desire or the wish to have the latest model of a partner—or the illusion that if one person who feels lonely and insecure finds another person whom he mistakes for being strong and secure they will be happy when they live together? What is modern man's attitude toward authority?—not only toward the overt authority of political or religious leaders, but toward the *anonymous authority* of public opinion, success, the specialist, the market? What do we mean by our ambiguous concepts of security, freedom, self-interest, and so on, which are glibly used without ever clarifying their different and often contradictory meanings? Hardly any research has been done in these fields; yet it can be done with the research tools and the theoretical knowledge we have, if only we consider those questions as vitally important—and, I should like to add, if we begin to criticize ourselves rather than to display our moral and critical sense only in judging the "enemy"—whoever he may be.

2. On the basis of such research, those concerned with mental hygiene must dare to have imagination in order to propose such changes in our social and political organization which could be the basis of mental health, a practice of life where man becomes an end in himself and ceases to be a prefabricated automaton. It is obvious that from this viewpoint the psychiatrist and psychologist have to integrate their work with that of the economist, sociologist, anthropologist, political scientist—and with that of the student of philosophy and ethics, in order to be able to make even the most tentative suggestions for an organization of society more conducive to human unfolding and productiveness and harmony, that is, to mental health.

It seems most fitting that the International Congress of Mental Hygiene should take place in Mexico. Mexico has made great progress in its industrialization, and this city is not only one of the most beautiful but also one of the most modern cities in the world. But Mexico is also a country in which an old, traditional culture is still alive—a culture in which people can allow themselves to be "lazy" because they are able to enjoy life; where a carpenter still enjoys making a good chair rather than thinking how to make it quick and cheap; where a peasant may still prefer having free time to having more money. I am not speaking as a romantic admirer of ancient ways in stating that, with regard to mental hygiene, modern man has to learn much from the great cultural traditions of the past. The task of a new synthesis is difficult indeed, but to acquiesce in the pattern of present-day society and to try to cure only the symptoms of a fundamentally unhealthy situation would, in the long run, defeat our best efforts. What we need is critical awareness of the dangers inherent in our present way of life and imagination and vision which spring from our faith in the striving for mental health and happiness inherent in human nature. Only a culture in which man is restored to his place as the unique and sole purpose of society, when peculiarity rather than uniformity is his pride, where he is an active and responsible participant in political and social life—only in such a society can there be progress toward mental health.

THE QUESTION OF EXTENSIVE TRAINING

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IN his paper on the role of clinical training in theological education, as originally read at the Boston Conference in October, 1951, Professor Reuel Howe said that he coveted two basic educational experiences for his students, over and beyond the traditional seminary curriculum. The first of these experiences, which he called "intensive" training, is made up of the present clinical training program. Here the student is placed, with a group, in some institutional setting under competent and trained supervision. For a number of weeks he is thrown into close physical and psychic relationship with persons in the midst of some type of immediate personal and family crisis and with persons who, in one way or another, are attempting to minister to these human needs.

Such an experience, we can safely say, does forcefully and dynamically confront the student with meaningful theological as well as psychological situations, and also he bumps into himself, face to face. Through group processes and competent supervision the student is helped to become aware of his own motivations, his own dogmatisms, his own defenses, and the maturity or immaturity of his own faith. Time has proved that such students return to the seminary not only with increased humility, but with a new eagerness to discover what relevant answers the Christian faith has to give to the questions that modern man is asking, for the most part unconsciously.

The second type of training experience cited by Professor Howe is called the "extensive" training program. Here the student, as a member of a group or as an individual, is placed in a total community situation (either town-and-country or urban), under supervision, and is asked to relate effectively and efficiently as a Christian minister to that community. Such a program, borrowing as it does from the classical interneship idea of the "curacy," is probably older in time than the intensive clinical experience, but as a deliberate, recognized training mechanism of the churches, it is infant as compared to the clinical training program.

Ideally, the two programs are complementary, but, given our present shortage of ministers and current limitations on the amount of time that a

candidate can spend in preparation for the role of a clergyman, the student is often faced with an "either-or" decision as to which program he will take. Professor Howe suggests that, should two summers' experience be demanded of the student, a logical sequence would be for the student to take intensive training his first summer and extensive training the second. This is certainly a sound idea, but with present requirements and accrediting policies such a two-step program is unrealistic for most students.

To a certain extent, today, the choice of program by the student is dictated by the policy of his particular seminary or, more likely, by the orientation of his professor of pastoral theology and field work. Other students, apparently, choose between the two types of experience on the basis of what they believe to be their own needs; the demands of their ecclesiastical superiors, such as bishops; and the financial benefits—or lack of them—involved in each program.

Some proponents of the extensive training idea put forth the argument that such a community-centered program is more realistic in that the student is attempting to find himself, and to minister, within a total situation. Here he is not relating to persons in immediate crisis, but to persons confronted by cultural crisis and potential personal crisis. Since this is the normal area of witness of the typical minister, they say, such a setting is productive of a more meaningful and relevant training experience.

In opposition to this justification, one might ask, "Can the blind lead the blind?" Is it possible for a student who, truly, knows not himself, adequately to bump into himself during his weeks of work in a diffuse, atomized community setting of today, particularly if he is working, not as a member of a team, but as an isolated individual? It might be argued with some justification that the extensive program is established with the idea of providing techniques for effective community ministering primarily in mind and therefore is not student-oriented but oriented toward more adequate denominational witnessing in contemporary life. Such a program, it could be argued, puts the cart before the horse.

Actually, we believe, the key-word is "supervision" and the operative person is the supervisor. Logically, granted a perceptive and acceptive supervisor, the student should be able to see himself completely and whole, good and bad, in either a closed, institutional setting or in the open community. Given such supervisory personnel, the student should be able to relate to and learn from the county welfare worker, as well as the ward nurse; the county agent, as well as the occupational therapist; the head of the county health unit, as well as the staff psychiatrist.

Through the years, the intensive training program has been successful in building up a sizeable body of trained supervisors. No extensive program, as far as we know, has been so successful to date. Two handicaps to becoming so are the wide geographic distribution of the program (at least as exemplified under the Field Training Program of the Protestant

Episcopal Church) and the fact that, as yet, the program has a multiplicity of masters. On the one hand, we have the student himself, desirous of knowledge about himself, his vocation, and the world to which he is to be "sent." Then we have the seminary, which wishes the student to acquire knowledge, but which also wishes to have some criterion for judging whether the student who may be academically proficient in the seminary setting can "in spirit and in truth" minister to people as they are, in the midst of normal joys and normal tragedies, everyday frustrations and everyday longings. And, finally, we have the ecclesiastical authorities who, traditionally, have been dependent upon the summer work of seminary students either to "hold some forts" or to "put out feelers" into new areas of concern. Such a program, relating to several key-points of concern, must have difficulty in producing a relevant experience which will be equally satisfying to all concerned.

Again, a trained supervisor, who is steeped in the needs and problems of the seminarian and with a real awareness of psychodynamics and who is at the same time prophetically and dynamically related to the Church's out-reach into the total community, should be able to help the student arrive at personal insight and, concurrently, meet some of the realistic demands of the hard-pressed ecclesiastical authorities.

Workers in the field of extensive training are currently wrestling hard with this problem of training adequate supervisors. In the past year, with the assistance of the Reverend Rollin J. Fairbanks of the Pastoral Counseling Center of Boston, two supervisors' conferences were held, one in Minnesota and one in Missouri. Here, men who would be delegated student workers in the summer (either on direct commission from the National Town-Country Church Institute or from diocesan authorities) were introduced to some of the basic principles of supervision, some of the common problems presented by maturing seminarians, and some of the common psychological defense mechanisms and intricacies of group dynamics. Admittedly, such conferences merely touched the surface, but such a "pricking of the skin" is a step forward. A more adequate series of such conferences is contemplated for the winter months, with repeat conferences and evaluations of the past summer's experience for those who have already been inoculated.

By the same token, the time schedule of the summer's program has been experimentally changed in hopes that it might be more experientially centered for the student. In past years the student went through a preliminary training and orientation period in a common center and then, after three weeks of lecture and discussion, was sent out into his field work. Evaluation of that work and a discussion of its meaning for the student were then left to the diocesan authorities and supervisors in the local field. Thus there was no common pooling of knowledge and experience, which obviously is such a tremendous factor for insight in the intensive program in a closed setting. Therefore, in 1952, the students met for a

week at the beginning of the summer for orientation, then went to their field placements throughout the nation, and were brought back for a final two weeks of evaluation and discussion. It is hoped that such a time schedule makes the program become more alive for the student, even though there is considerably more expense involved for the Church as a whole in terms of travel money. Again, because of the demands of different masters, this plan does not prove to be completely satisfactory since some bishops and diocesan authorities have so arranged their summer schedules of work that it would be hazardous to the on-going work of the diocese to have the student pull out two weeks before the end of the summer. Should the present program, on evaluation, seem more workable and significant than the past one, it is hoped that such conflicts may be mediated before another summer.

Also, persons concerned with the extensive program are now attempting to establish common, over-all standards so that all students, no matter what field they may go to for their work, will be cooperating in common experiences and be getting the same program of supervision, such as weekly supervisory and group conferences. In the intensive program such standards are easily worked out. However, when a student may be working in a broad town-and-country area, with his supervisor living as far as fifty miles away or, in some cases, being the diocesan bishop, such regular supervisory practices are much harder to standardize.

Another change in the programs involves that of remuneration for students. Currently, the intensive program expects students to pay for their training as part of their regular seminary tuition, and the supervisors are professional, paid people. In the past the student received an honorarium, depending on need, for enrolling in the extensive program, and the supervisors were doing their educating job on their own time and at their own expense. This year the students' transportation expenses were met by the total program, but, again depending on resources, some students paid tuition fees while others paid nothing and received nothing. True justice is obviously still not being done and the problem is still to be wrestled with and pinned down. One change which is being seriously considered is that of paying supervisors who are trained up to certain standards.

Because of their broad scope, both in terms of geographic setting and centers of concern, the current extensive programs have many problems still to solve. The testimony of over-all Church authorities, as well as of seminary authorities, is that, on the whole, the current program is moving in the right direction. As will all consumers of education, some of the students have received real value from the program; others have not.

It is our belief that the trained personnel in the clinical training movement could help us a lot in clarifying objectives, methods, and techniques in the extensive program. Our Macedonian cry is thus issued because we feel that the intensive and extensive training programs are truly complementary and, when looked at from an over-all vantage point, represent but opposite sides of a single coin.

THE ROLE OF THE CHAPLAIN IN PATIENT RELATIONSHIPS: INITIAL RELIGIOUS INTERVIEW

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In discussing the role of the mental hospital chaplain and its significance for the patient newly admitted to the hospital, stress will be laid on two main concerns: (1) the patient to be seen by the chaplain and (2) the purpose of the chaplain's visit.

The Patient to Be Seen by the Chaplain

The author has found that an awareness of certain factors about the mentally ill patient is the best orientation for effective pastoral work. Such awareness conditions one's attitude and function so that there is greater opportunity to render a more effective pastoral ministry.

Perhaps one of the most significant things which has come to our attention about our mentally ill patients is that they are people who have suffered serious hurt in their interpersonal relations. Usually this hurt has existed a long time. It marks a failure in certain relationships with people who are important to our patients, and who have not been able to give them the things which make for "life." Quite frequently there is evidenced a lack of tenderness and warmth in the very relationships which are most demanding of these experiences of intimacy. To point this up is not to "blame" those who have so failed our patients, for anyone who works with the relatives of the mentally ill soon realizes how little they "chose" to be the way they are and how little they "intended" some of the things they did. Because of these failures, however, whether intentional or not, it is very important that our whole approach to the patients be one in which it can clearly be recognized that there will be no addition to this interpersonal hurt if the chaplain can possibly avoid it.

The mentally ill are extremely anxious individuals. In fact, mental illness has been interpreted by some as a defense against intolerable anxiety. Not the least of the reasons why these people feel so anxious is that what has happened in life has seriously impaired their sense of self-esteem. We find our patients both feel and act as though they had little self-respect, and in this way the illness itself serves as a means to help them deal with their very painful feelings.

Paper delivered at the Annual Meeting of the Association of Mental Hospital Chaplains, Atlantic City, May, 1952.

Another thing that is noted about these patients is that the illness in itself is an evasion or a running-away from things that are real. That the reality of the patient's life is unbearable is axiomatic, but the evasion does little to alter the situation. We can easily imagine the need for such evasion if we stop to think about some of the basic feelings involved in this kind of illness. If there has been a denial of the very things that make for life, then there must be inevitable frustration, which is followed by a hostility response, and this in turn leads to an extremely painful guilt-reaction. The central focus of the problem with the mentally ill is that the patient does not have the self-respect necessary to face these negative feelings within himself, and hence needs to run away. One of the most devastating things that can happen is to have attention drawn to the very feelings the patient cannot face; this not only adds to the original injury, but it further depreciates the patient's self-respect. Above all else there is needed a supportive and accepting relationship so that there can be created for the patient the kind of emotional atmosphere in which he can come to feel free to look at some of the things from which he has been running away.

It is necessary to remind ourselves that our mentally ill patients are people who are extremely concerned lest they reveal themselves. This has led authorities in the field, such as Dr. Frieda Fromm-Reichmann, to suggest that mental illness is the eruption, or the threat of eruption into awareness, of unacceptable personality tendencies. It was recognized as such by Kierkegaard, who, in his *Concept of Dread,* when discussing the demoniacal, points to mental illness as "shut-up-ness unfreely revealed." [1] It is the very powerlessness to control or avoid the thoughts, impulses, and wishes that seem to overwhelm him that arouses such frank terror in the disturbed individual.[2] For the religious worker this has untold meaning.

It was the awareness of such feelings that led to Kierkegaard's statement that the demoniacal was in essence "the dread of the good." [3] Here he draws graphic attention to Jesus' dealing with the mentally ill of his day and points up an almost uniform pattern that was set up in Jesus' contact with them. First they would want to know "what have we to do with Thee, Thou holy One of God?" By implication we find here the question, "What can such a good person want with such an evil person as I?" The answer comes in the form of a question: "Art Thou come to torment us?" The implication is that "there can be only one reason why You have come: I am bad—You are good, and know how bad I am—You have come to deliver the punishment merited." The result comes

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[1] *The Concept of Dread* by Soren Kierkegaard (translated by Walter Lowrie), p. 110, Princeton University Press, 1946.

[2] See Dr. Anton T. Boisen's *Exploration of the Inner World* for a very illuminating discussion. The volume was first issued by Willet, Clark and Company in 1936 and has since been republished by Harper and Brothers, New York, 1952.

[3] *The Concept of Dread,* p. 109.

quickly when Jesus is told: "Depart from us." The implication is again clear: "We have had all the pain we can stand—do not add to our pain—leave us alone." [4] This is the language of those who feel that, by virtue of what they are, have done, or would like to do, they are fit only for punishment and ostracism. This makes for a tremendous sense of guilt and a consequent feeling, often most poignantly expressed in symbols, of the patient's being different from the rest of mankind. Thus it is that the mentally ill patients come to feel that they *ought* to be punished, *ought* to be ostracized, and *belong* in such a place of known social stigma (the mental hospital). In such feelings one can readily find a real clue as to why the mentally ill so often believe they are forsaken of God.

Herein lies the chaplain's most significant opportunity. With all the patient's feeling of guilt and shame, with the apparent verification—by his hospitalization—of his feelings of self-condemnation and ostracism, the last person he expects to have call on him is a "man of God." If the minister does call, the patient feels it must be to condemn or to unbraid him. This sets the stage for an initial religious interview which of necessity must be based on a friendly supportive relationship, best illustrated by a creative listening attitude, by which the patient comes to feel reasonably free to share some of the concerns that have made life so painful for him.

The Purpose of the Chaplain's Visit

The basic purpose of the chaplain's visit is to establish a friendly relationship *as a pastor* with the patient, a relationship in which the distinctive resources of religion will be used with the patient *if* these are needed and *if* they are acceptable to the patient. The method by which the chaplain seeks to implement his purpose is the taking of a religious history. Since we are ministers, the patient has every right to expect that we will be interested and concerned about the significance of religion in his life. If his association with religion has not been too traumatic, and hence no overwhelming threat is experienced when it is introduced in the interview, it is felt that such discussion can be a very helpful means of furthering this relationship. But it cannot be overemphasized that *the taking of a religious history is always secondary to the establishment of a friendly supportive relationship.* Such discussion will offer the patient a socially significant opportunity to discuss his interpersonal concerns through a medium offered by no other professional person. As a result problems will often come to light which would not have been available through any other kind of interview, but which may have been of considerable personal distress to the patient.

This type of interviewing also offers us an opportunity to help the

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[4] Cf. Matt. 8:28-34; Mark 5:1-20; and Luke 8:26-39; also Kierkegaard *The Concept of Dread,* pp. 105 ff.

patient take stock of his religious resources. We have been hearing much from the psychiatrists about the need for stressing the positive elements in the patient's history. As chaplains, we can help the patient clarify the positive significance of his use of such religious resources as prayer, church attendance, the receiving of the sacraments, the reading of the scriptures, and his unique place in the religious fellowship.

It also soon becomes apparent that the chaplain has a notable opportunity to explore with the patient certain religious problems not as yet worked through. Many of our patients present significant failures in their religious life, and they attempt to deal with these failures largely through a pattern of withdrawal and concealment. With the encouragement of an understanding chaplain such previously painful experiences might well be faced and recognized for what they are. We all know that even negative experiences can be worked through to a most helpful integration of personality structure.

Such interviewing frequently makes possible a realistic planning for follow-up interviews. Many times we encounter specific religious problems which cannot adequately be dealt with except in a series of interviews. Such problems as the feeling of the loss of faith, that prayer or other specifically religious practices are no longer as meaningful as they once were, that God is punishing the individual, that hostile feelings have no place in the Christian's life, and others are all fruitful areas for follow-up investigation with the *trained* chaplain.

The interview also provides a good opportunity for offering helpful information about the hospital and its procedures. At the time when the patient has first been admitted and the anxiety and fear associated with his commitment are still high, such information can do a great deal to offer supportive structure. That such information has already been, or will be, given by another staff member does not invalidate its usefulness. If it comes from a clergyman the patient often finds it much easier to accept as something genuinely intended to be of help to him. In addition, the very confusion attendant upon hospitalization warrants the repetition of such useful information.

Where it is indicated that these are of concern to the patient, it is often helpful to face frankly with him the stigma associated with being mentally ill, the long time it takes for patients to recover, the fact that recovery is possible and that most hospitals have a hopeful discharge rate, and that the patient will be honestly dealt with in the hospital. These are all concerns which have been helpfully dealt with in initial religious interviews.

However, there are equally significant and perhaps more pertinent problems the religious worker can face with the patient. The patient's hospitalization can literally be *the end* for him, or it can be only the end which must come if there is to be a *new beginning*. The hospital can pro-

vide for this change in the patient by the fact that its staff is trained to help the patient deal with the very things about himself that he is not only not able to talk about, but feels he must hide from the other members of the community. When the chaplain draws to his attention that *anything* can be discussed in the hospital, that the staff are trained to deal meaningfully with such concerns, and that what he discusses in the hospital does not follow him back to the community in which he lives, the patient is often encouraged to face things he never could face before. By virtue of such discussion new insights into his own interpersonal operations are obtained, and new strengths found, so that the patient no longer has to resort to such drastic measures at concealment. We should, however, be cautioned against *urging or demanding* a patient to talk to other staff members. A patient's reluctance must always be respected. We have utilized our opportunity when we have *encouraged* the patient to see that discussion with the appropriate staff member can be the means by which help is obtained in given circumstances. The rest is up to the patient.

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By way of a summary, it can be pointed out that considerations such as those mentioned stress heavily that, in any work with the mentally ill, what a chaplain is in himself matters far more than what he does. Only when he has dared to allow himself to enter something of the suffering and joys of his own living, when he has come to terms with his own experiences, is he in a position to appreciate similar feelings in others. As in any work with people, the attitude of the pastor determines the effectiveness of his ministry. If the chaplain has a keen awareness of the "interpersonal hurt" of his patient, knows the desperate and yet fatal need of the patient to evade further pain, feels something of the almost overwhelming (intolerable) anxiety experienced, is not too shaken by the terror evoked through "shut-up-ness unfreely revealed," and can accept the consequent intense feelings of guilt and shame which isolate his patients from themselves, from each other and from God, then his ministry has within it the necessary elements of a supportive and creative experience for the patient.

In his approach to the patient the chaplain seeks to understand something of what the patient has experienced in his living which has made it necessary for him to become mentally ill. By this he offers the patient the greatest gift he has—the gift of himself. His own friendly interest, his own reaching out with concern, his own desire to be helpful through a trained and understanding use of his unique religious resources—these are the things the patient needs. In this way the chaplain can make his contribution to the hospital's treatment program for the patient.

THE ROLE OF THE CHAPLAIN IN PATIENT RELATIONSHIPS: WORK WITH THE CHRONICALLY ILL

THE REV. CARL J. SCHINDLER

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THE large number of chronically ill patients in our state hospitals constitutes the most potent argument for the services of resident chaplains in these institutions. Chronic psychotics are the truly forgotten men and women in our society. It is understandable that the psychiatric staff devotes its time to newly admitted patients with more favorable prognoses. Psychologists and social workers have only rare occasions to contact chronic patients. Apart from the occupational therapists and ward personnel, the chronically ill depend entirely upon their fellow-patients for human contacts and outlets.

The writer serves as part-time chaplain; he is keenly conscious of the contributions that a resident clergyman could make in this field, yet lacks time and facilities to put his ideals into practice.

All of us are probably agreed that little can be done for the severely deteriorated patients, except for a friendly greeting and some expression of recognition, preferably on the nonverbal level. We are also agreed that they should never be "brushed aside." They also have a claim on the chaplain's time and should, if possible, think of him as a friend.

The therapeutically most meaningful work of the chaplain can be done with paranoid and depressed individuals. The work with paranoids can be rewarding. Their mental faculties are often well preserved and the level of intelligence is high enough to make it possible to engage them in conversation on a variety of subjects. These conversations serve a distinct purpose. Unlike the psychiatrist, who must probe for painful and delusional material, the chaplain can confine himself to "clear areas." He can accept the paranoid as an intelligent, respectable citizen and social equal. He can discuss art, literature, philosophy, and religion with these patients, who are often intellectually starved in the routine of state hospital life. I avoid, as far as possible, the discussion of current events; they lend themselves too readily to paranoid distortions.

Paper delivered at the Annual Meeting of the Association of Mental Hospital Chaplains, Atlantic City, May, 1952.

The chaplain with an educational background in the humanities is often in an excellent position to use this approach. Moreover, he is not as frequently involved in the paranoid thinking of the patients as are physicians and nurses. In the patient's mind the chaplain represents the church rather than the institution. My experience is admittedly limited, but I can recall very few cases of Protestant paranoids who included their own church and its ministry in their delusions, though hate and fear of other religious communions is, of course, a familiar feature. I am presently planning group sessions with a few selected patients of this type, in which we shall study some of the "great books" which have been edited by the University of Chicago for round-table discussions.

I am firmly convinced that depressed patients need religiously enforced and supported reassurance. Whatever the organic causes of depressions may be, the psychological factor remains that depressed individuals cannot find support or security in the world or the people around them. That may well be the reason why psychiatrists are inclined to look askance at the technique of reassurance itself. It is often used too casually and lightly, and always with reference to the environment or to the feelings of the patient about himself. Particularly after shock treatment has failed and the mood of futility and helplessness tends to become an established pattern, it is doubly important to direct the vision of the sufferer to "the hills from which cometh my help." When the feeling of personal unworthiness threatens to overwhelm the personality, a Christ-centered psychotherapy is needed. A physician or a nurse, were they so inclined, could, of course, remind the patient of the divine promise that "though your sins be as scarlet, they shall be white as snow; though they be crimson, they shall be as wool." Yet they could not make this pronouncement with the same ring of validity as can the chaplain, who, in the eyes of the patient, is the representative of God and his Church.

Many therapists question the value of any form of psychotherapy in depressions and depend entirely on medication and physical medicine. There is, however, great value in the pragmatic outlook of the psychiatrist who recently said to me, "We know so little of the underlying dynamics of therapy that we should be grateful for any approach that promises relief for the sufferer."

RELIGIOUS ECSTASY: A NOTE

THE REV. PAUL B. MAVES

Associate Professor of Christian Education, Drew University, Madison, New Jersey

In his monograph on *Sleeping Preachers* published by the Finnish Academy of Letters and Sciences, Aarni Voipio presents a study of a religious phenomenon which is still extant in parts of Finland but which has appeared in many European countries since the Reformation.[1] This phenomenon involves laymen, usually women, who fall into a trancelike state and, while reclining or sitting in bed, lead a regular church service and preach a full-length sermon. These states are often accompanied by convulsions and anesthesias. Their appearance often follows episodes of psychic suffering and morbidity. Voipio's conclusion is that this is an hysterical phenomenon in which there is dissociation of the personality.

The function of such a state seems to be that it provides a way for a disenfranchised person to surmount cultural and ecclesiastical restrictions which the church and society have placed around the right to preach.

The monograph stimulates some fascinating questions about the relation of ecstasy to religious work. We might state the hypothesis as follows: A person has a strong impulsion to preach, sometimes rooted in morbid tendencies and repressed strivings. This impulsion must surmount hostile or restrictive forces of one kind or another. In the case of the sleeping preachers it is the stricture of the church against women and laymen preaching. These restrictions, which are enforced as much by social tabu and conscience as by legal coercion, are broken through by a process of dissociation so it seems that it is another who is preaching. He has been seized. He stands beside himself. It is difficult to hold him legally or morally responsible for his acts since it is not he but another who preaches. He feels powerful and derives immense satisfaction from the preaching although he suffers when not in ecstasy. The pattern of the seizure may be suggested by the culture or stumbled on by accident.

Similar phenomena are reported by Zora Neale Hurston in *Tell My Horse* (J. B. Lippincott, 1938) as common to certain sections of Haiti. In these regions a spirit or god "mounts" a subject and speaks through him. This is the origin of the phrase "from the horse's mouth," since

[1] A review of this monograph appeared in Volume 6, No. 4, of this *Journal*.

the subject is thought of as the spirit's horse. Frequently these utterances are directed against persons in authority who ordinarily cannot be criticized, although at other times it appears to be a means of social control in which undesirable behavior of any kind is condemned. Sometimes a spirit rides a "horse" to destruction in suicide. Occasionally it seems that such a seizure is simulated or faked. There are certain tests of its genuineness, such as throwing red pepper in the eyes of the "horse." If the seizure is genuine there is no reaction, suggesting that here again we have anesthesia, but if it is faked a violent reaction occurs.

In these states, in both Finland and Haiti, it is clear that the person involved is playing a role or using a role for the expression of his inner needs. In the ecstasy the role played is one that for one reason or another cannot be taken consciously. But the role would be of no value to the subject if it were not socially acceptable or valued. So the individual need may be reinforced and its expression may even be suggested or demanded by a social group. So the most suggestible or perhaps the least stable person in the group becomes unconsciously the mouthpiece or spokesman for the group! A similar thesis was advanced by Frederick Morgan Davenport in *Primitive Traits in Religious Revivals: A Study in Mental and Social Evolution* (Macmillan Company, 1905).

It should be noted that the person in ecstasy is essentially the same person, with the same natural gifts, the same characteristics and style, and the same background and training. He simply does different things and sometimes does well things that ordinarily he could not do because of inhibitions. Sometimes persons make significant contributions through the medium of their ecstasy—sometimes their influence is vicious. George Bernard Shaw's fascinating analysis of the social value of such ecstatic phenomena in The Preface to *St. Joan* is a real contribution to this point.

As one thinks about it, such questions as these present themselves: To what extent or in what ways does ecstasy or dissociation take place in the ministries of various groups in American culture? Is ecstasy a good thing or is dissociation of roles always unwholesome? To what extent does the excessive consciousness and rationalism of our age mitigate against religious ecstasy? Otto Rank has pointed out in one place that in our age we suffer from too much consciousness and that what we need is an emotional experience which is tense enough to lighten the tormenting self-consciousness with which too many of us are afflicted. What is the relation of such a statement to the ecstatic types of religious expression to be found in the sects in American culture? Is sectarianism an American answer to the religious restrictions placed on persons in other national contexts so that ecstasy is not necessary? And, finally, how would the pastor trained in modern counseling techniques and with a psychotherapeutic point of view deal with states of religious ecstasy?

The Journal of
Pastoral Care

VOL. VII SPRING, 1953 NO. 1

EDITORIALS

Religious and Psychiatric Collaboration

In this issue of the *Journal* there are being published the second two in a series of four papers dealing with the relationship between Christianity and psychoanalysis. We are deeply grateful to the Organizing Committee of *Christianity and Modern Man* for making these privately circulated papers available for publication. It should be pointed out that the four papers as published in the *Journal* do not contain all the material presented in the original series. For instance, our publication does not include the panel discussion in which all four members participated, nor does it contain the questions and answers which came out of the discussion following the presentation of each paper. The footnote reference attached to each paper in the series will indicate where a complete copy of the original material may be obtained.

This series is an excellent illustration of the results of mutual collaboration between two professional groups similarly concerned with understanding interpersonal processes. Some three years ago a small group of clergymen and psychoanalysts in Washington began meeting regularly with the object of exploring the relationship between the two professions with their common goal of helping people. It was felt that such discussion, already enthusiastically initiated in New York City by a similar group, might well help to bridge the gap of misunderstanding and antagonism which at times has manifested itself between the two professional disciplines. Both interest and enthusiasm continue to grow, at times somewhat embarrassingly so, in that as the group grows larger, the discussion tends to become much more formal; and already some of the results are being demonstrated as the members of both professions share with each other, not only their insights, but themselves as well.

There is much in these papers which should stimulate fruitful research,

especially among those clergy who, as a result of some experience with clinical pastoral training, have become impressed with the possibilities of informed pastoral work. In Dr. Edith Weigert's paper we are challenged with the statement that it is out of the very early child-parent relationship that trust develops, and " . . . This trust, this confidence, which precedes all rational thought processes, seems to me to be the matrix or an early manifestation of religious experience." Such a statement, coming as it does out of extensive and careful clinical observation, should provoke serious investigation on the part of pastors as to the Church's contribution to early child-parent relationships. Parental instruction at the time of a child's baptism can be a most significant medium by which we can promote meaningful religious development, as Dr. Reuel L. Howe of the Virginia Theological Seminary has already begun to report in his writings. But we must know *empirically* the meaning of such instruction, and this can only come about by careful, patient, and persistent investigation of what we do with people in our pastoral role as we seek to implement the vast resources of the Christian faith and practice.

One gets the very clear impression from reading the papers presented by the two psychiatrists that at least two of the major concerns some clergy have about the discipline of psychiatry are not shared by these specialists. One of the points of contention between the minister and the psychoanalyst has been the belief of clergymen that not only can anxiety not be eliminated from human living, but that *in some measure* it plays a very helpful and positive role. It is still possible to hear or to read psychoanalytic thought which maintains that the function of therapy is to eliminate all anxiety. It may well be that here again we have a semantic rather than a conceptual problem, for it is recognized that Freud and some of his followers gave specific definitions to the meaning of anxiety. However, the fact remains that in coming together in mutual discussion, such so-called points of difference can be helpfully dealt with.

It is also rather apparent that in these two papers we have an indication that the psychoanalyst is very much concerned about what has come to be called the problem of "values." With some of the recent writing of Erich Fromm and those of similar background, it would appear that there is no longer as much of a conflict as to whether the psychoanalyst is concerned *about* values, but rather what the values are that the therapist holds to be important in his treatment of people. Here, again, mutual collaboration can be extremely helpful for both disciplines.

There is still current a tendency to think of "psychiatry" as anti-religious. And there are still many of us who appear intimidated by certain of Sigmund Freud's statements in his *Future of an Illusion!* It does us good to be reminded, as does Dr. Hans Loewald, that " . . . The mature individual, being able to reach back into his deep origins and roots of being, finds in himself the oneness from where he stems, and understands this in his freedom as his bond of love with God." Such an observa-

tion both challenges and invites further cooperative exploration, as well as allaying some of the suspicion felt by members of the clergy.

There has been some indication that where the members of both professions meet together in order to share with one another both their experience and their insights, not only can they be drawn closer together, but they mutually enhance each other's understandings. Such ventures not only promote inter-disciplinary collaboration, but they must inevitably result in benefit to the individual both professional groups seek to serve.

E. E. B.

Changes on Our Editorial Board

In our preoccupation with future opportunities for our *Journal,* it is easy to forget the past. Occasionally, however, an incident serves to remind us that we are where we are because of the foundations created—often laboriously—by those who helped launch the first professional publication in the field of pastoral care.

The retirement of the Rev. Charles M. Styron from our Editorial Board serves as such an "incident." When the original *Journal of Pastoral Care* was started by the Institute of Pastoral Care in the fall of 1947, Charles Styron was one of its most ardent supporters. As chairman of the Editorial Board of that first *Journal* he gave generously of both time and counsel. When the merger with the *Journal of Clinical Pastoral Work* took place in 1950 and ownership of our present publication was assumed by the Council for Clinical Training, Mr. Styron continued his assistance as a member of the Editorial Board of the new *Journal.* It is with gratitude that we acknowledge his contribution to our publication.

We have been fortunate in securing the Rev. Samuel H. Miller to succeed his friend, Mr. Styron. Dr. Miller is pastor of the Old Cambridge Baptist Church, in Cambridge, Massachusetts and Adjunct Professor of the Philosophy of Religion at Andover Newton Theological School. He is a member of the Board of Governors of the Institute of Pastoral Care and one of the best informed clergymen in New England on the relationship of psychiatry and religion. He has had many reviews published in the *Journal* besides two excellent articles, "Sources of Professional Hostility" (Vol. II, No. 2) and "Exploring the Boundary between Religion and Psychiatry" (Vol. VI, No. 2). We welcome him "aboard" with admiration and gratitude.

R. J. F.

BOOK REVIEWS AND NOTICES

EDITED BY ROLLIN J. FAIRBANKS

This Is Your World: Harry A. Wilmer; Charles C. Thomas, Springfield, Ill., 1952. 165 pp. illus. $5.50.

Dr. Wilmer is both an instructor in medicine (neuropsychiatry) at Stanford University and a consultant in psychiatry to the San Mateo (California) County tuberculosis sanatorium. From his experience he has written an intriguingly different and helpful book about the emotional problems of those who are chronically ill.

Material is drawn from the author's own experience as a patient and from original clinical material based upon his experience as leader of a group therapy program at San Mateo sanatorium. Dr. Wilmer quotes Sir William Osler's comment that "tuberculosis is a social disease with a medical aspect and it is just as important to know what is in the patient's head as in his chest." It is this emotional data in the "patient's head" which is the focus of the book.

Over a two-year period Dr. Wilmer met with groups of tuberculosis patients. From notes taken, he has composed a three-part ballad, "This is Your World," which was rewritten in the light of criticisms and comments by the patient group. The ballad, which is printed in full, is a stimulating group expression of the experiences of chronic illness. Especially moving to this reviewer was the closing of Part One:

> I accept dependence
> But not the indignity
> Of a spirit enslaved.
>
> I accept
> Beds,
> Rules,
> Loneliness,
> Physical surrender—
> But I retain
> My inalienable right
> To self-defense!
> With no power to attack
> I will defend myself
> With protective weapons,
> The armor of the weak.
> Such as the thorns on flowers,
> The quills of porcupines,
> Camouflage of feathers;
> Still, breathless fright,
> Or soaring flight—
>
> Escaping through
> Letters, games, quips, and talk,
> And books and dreams,
> And thousands of ways–

Along with the "Ballad" are printed three informal talks recorded by the "doctor" and sixteen dramatic situations of interpersonal relations. These

situations are presented because each represents a significant area in the emotional adjustment of the patient to his cure. The ballad, the talks about "people," "authority," and "society," the dramatic situations and an optional list of movies are used as stimuli for group sessions meeting an hour per week over a ten-twelve week period.

From his experience Dr. Wilmer, in a pleasing conversational style, draws a number of conclusions. Central to these is his feeling that the "relief of anxiety still remains the bulk of his (the doctor's) work." These anxieties are related to childhood and life experiences; and the book presents the author's experiment with methods of therapeutically dealing with those anxieties and their childhood roots.

This book would seem to have considerable value for any person working with chronic patients, for those concerned about an apparently effective use of the group method, and for any one enjoying a stimulating, readable volume.

THOMAS W. KLINK

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Counseling Adolescents: Shirley A. Hamrin and Blanche B. Paulson; Science Research Associates, Chicago; 1950. 371 pp. $3.50.

This is the first of a series of volumes in a Professional Guidance Series planned by Science Research Associates. That is, the series is designed for those who are to be professional counselors or guidance workers in schools and related types of situations; and this particular volume is devoted to counseling with teen-agers. Most of the illustrations are drawn from high-school situations. Dr. Hamrin is on the education faculty of Northwestern; Miss Paulson is with the Chicago public school system.

This book is plainly intended as an introductory textbook in guidance for college courses, teachers' college courses, and first courses in graduate schools of education. Its chief merits are simplicity of writing, abundance of illustrative and case material, lack of dogmatism in point of view, and placing the entire discussion in the context of schools in which the counselors-to-be are most interested. It does not make, and is probably not intended to make, any original contribution to our knowledge of counseling. The book identifies three kinds of positions a counselor may take: that associated with the name of Williamson of Minnesota, that connected with Rogers of Chicago, and an "eclectic" position. "In this book, the authors wish to give primary emphasis to those counseling methods which can be classed as explanatory, informative, and educative in character." This is surely legitimate; but, with this emphasis, the knottier problems of counseling theory and practice do not come into the foreground.

As an introductory volume for the group intended, this work would seem to have much merit. As a general introductory work on counseling adolescents, for such other students as the clergy, the book is distinctly less valuable. There is, for instance, no analysis at all of any particular pressures, problems, or tendencies confronting adolescents today. No doubt such analysis, for the students using this book, will be made in other courses. But the absence of such material from a book of this kind helps to rob it of wider usefulness. Religion is carefully avoided in the book, and perhaps with some reason. "Philosophy of life," while mentioned, is dealt with very briefly, and without much explicit linkage with the counseling procedures.

SEWARD HILTNER

The Reformation of the Churches: James H. Leuba; Beacon Press, Boston, 1950. 219 pp. $2.75.

For those readers who are already familiar with Dr. Leuba's energetic efforts to dissect the anatomy of organized religion, using the methods of an alleged "scientific approach" (questionnaires et al), this book will seem redundant. Completed prior to his death in 1946, it has been published under the direction of the author's son, Clarence Leuba, and the Rev. E. Burdette Bockus, pastor of the Unitarian Church in Indianapolis.

Dr. Leuba believed that the Protestant churches are in the midst of a reformation more significant than that experienced by the Christian Church in the sixteenth century. This change is marked by an emancipation from the primitive worship of a mythical supernatural by the historic churches. The search for the highest values of life is a legitimate goal, but the methods hitherto employed have been crude, superstitious and infantile. The Christian God is dead, or never existed. This is not proclaimed boldly by the author, but rather sadly. Scientific humanism has replaced Christianity, although Christian ethics can be salvaged and transplanted to this new faith.

College students and "important" (i.e., prominent) people were queried in 1914 and again in 1933. The results were tabulated and compared, and Dr. Leuba concluded that the increase in "doubters" reflected what is taking place among civilized people today. They have outgrown the fairy stories of historic Christianity and its promises of Utopia.

Dr. Leuba would seem to argue that because many thinking people are doubting, the Christian leaders should surrender now to an inevitable defeat. It would appear to this reviewer that the implications of the argument are that if a religion or philosophy of life is unpopular, it is therefore inadequate, outmoded, and false.

Another weakness in this sincere and courageous challenge of Leuba's is that the bulk of the data was obtained through the use of questionnaires—at best fallible instruments, especially in securing beliefs of people. Furthermore, the sampling was not representative of our society. Clergymen, theologians, and other students of religion were excluded.

The last part of the book deals with the philosophy, conduct, ritual, etc., of the new "Reformed (humanistic) Churches" which Dr. Leuba believed were about to emerge in our contemporary, civilized society. Specific offerings included a "Christening" service, a marriage ceremony, a funeral address, and appropriate songs and readings. In preparing these, the author has admittedly borrowed liberally from the Ethical Culture Societies.

ROLLIN J. FAIRBANKS

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Strengthened with Might: Harold Wilke; Westminster Press, Philadelphia, 1952. 95 pp. $1.50.

This book fills a unique place in pastoral literature. While Harold Wilke's earlier book, *Greet the Man,* set forth a ministry to the recently wounded serviceman, *Strengthened with Might* is concerned with the handicapped of

every sort. Virtually nothing has been available to pastors in this sphere, although many "How to—" books of pastoral work have been applicable in a general way to the methods of the pastor.

This book is not another book of techniques. It is addressed directly to the handicapped. Wilke thinks out loud with a disabled person, and the reader is permitted to "listen in." Unlike the tone of an interview, it is meditative. The first section, entitled "Looking Inward," portrays and illuminates the inner experience of the disabled through various stages of trouble and growth. The second section, "Looking Outward," deals with the reactions of others toward the handicapped, the re-reactions of the handicapped, and how both of these may build up barriers of misunderstanding or bridges of understanding. The focus is on the disabled person himself and what he can do to make the difference. The third and last section, "Looking Upward," presents with force and appeal the religious interpretation and solution. Autobiographical incidents concerning Harold Wilke's own handicap (the loss of both arms) are woven into each section, shedding a warmth and wise humor throughout. The book concludes with scripture, poetry, and other materials for devotional use. Two groups will find special help in this volume: the handicapped and those who are close to them personally and professionally.

ROBERT A. PRESTON

•

God at Work: James Parkes; Philosophical Library, New York, 1952. 178 pp. $2.75.

A student of anti-Semitism and the relation between Judaism and Christianity has written this book on the ways in which God works in the world and reveals Himself. At Sinai God revealed His will for the communal life of men; at Calvary in Christ He revealed the power for living a new life; in the historical movement of scientific humanism God the Spirit reveals Himself in an impersonal and immanent manner in the search for knowledge of the universe, thus completing the trinitarian formula.

In this essentially Sabellian approach (with a difference!) Dr. Parkes omits the atonement, attributes the functions of the third person of the traditional Trinity to the second person, and fills out the trinitarian formula as described above. Following this approach, it is not clear why the Renaissance could not be a revelation of a fourth person of the trinity. The author's interesting thesis raises an important problem for Christian theology: Is the creative power of such cultural movements as the Renaissance and modern science to be attributed to the Pentecost Spirit or to the Divine Logos? This book certainly points up the need for a new theology of culture.

OWEN C. THOMAS

•

Divine Direction or Chaos?: Charles H. Lee; Philosophical Library, New York, 1952. 98 pp. $3.00.

In this book a civil engineer who was converted from materialism to Christian Science by his wife discourses rather confusedly on the philosophical

bases of his religion. His thesis is that natural science has destroyed traditional philosophy and theology and has itself reached an impasse, and that now Divine Metaphysics can come into its own and save the day. The second half of the book is an elaboration of the doctrines of Christian Science with copious references to the "divine metaphysicians" Moses, Jesus, and especially John and Mary Baker Eddy. According to the author, Christian Science is based on the theory of the illusory nature of matter and evil, and is defined as "the Science of Mind that is God, and of the universe as His Idea, and their relation to each other." It has taken the place of natural science whose "unreliability and falseness" causes its findings to be "rank superstitions." To this is added an extreme social conservatism and a frightening nationalism which defines America as "man's individual oneness with infinite intelligence, or Mind, everywhere present." (!)

OWEN C. THOMAS

•

Woman Today: John Fitzsimons; Sheed and Ward, New York, 1952. 192 pp. $2.50.

What a wide difference it makes, when we discuss the perennial and ever-fresh subject of Woman, whether we start with the premise that she is able to compete successfully with man on his own terms ("we can do anything they can") or assume that she is *different.* The author's view is that God took an "insignificant part of Adam" to make Eve, so that "male *and* female created He them." At the same time Father Fitzsimons knows of Margaret Mead's discoveries in New Guinea of the Arapesh, whose women and men were alike feminine; the Mundugumor, whose men and women were predominantly masculine; and the Tchambuli, among whom both sexes were characterized by the traits supposed to be true of its opposite! He doesn't offer to harmonize his "creationist" theory with the facts of empirical anthropology; he just points to the contradiction.

Father Fitzsimons is chaplain to the girls' division of the Young Christian Workers of England and Wales. Since he works constantly with wage-earning young women in industrial society, his approach tends to be a down-to-earth one, and his focus is definitely on *women today,* as we meet them in industrial Western society. His bibliography shows that the psychology he employs is Rudolph Allers' merger of individual psychology (Adler) and the Roman Catholic doctrine of man. His thesis is clearly much shaped for him by Gina Lombroso's point of view as published by her in 1924 in *The Soul of Woman.* (A somewhat more sophisticated and more up-to-date development of the same point of view was provided some years ago for Americans by Marynia F. Farnham and Ferdinand Lundberg in *Modern Woman—The Lost Sex.*) In brief, it is the doctrine that "woman" is constitutionally (in biological, psychic, and physical make-up) devoted to and intended for *Küche, Kinder und Kirche.*

Insisting that women are by nature of a different order than men ("woman is by temperament more religious than man") and that modern industrial culture is dominated by masculine values and standards to which women are both urged and from which they are fenced off, Father Fitzsimons calls for

Christian leadership in creating woman-centered functions, roles, and departments in the cultural order. He is, however, entirely clear that all he calls for depends for its validity upon his first premise that women cannot change no matter how the culture-pattern may. With this in mind, he points us toward a "theology of women" and tries (in Chapter XI) to base it biblically upon a startlingly literal interpretation of the creation myth in Genesis.

JOSEPH FLETCHER

•

Voluntary Parenthood: John Rock, M.D., and David Loth; Random House, New York, 1949. 308 pp. $3.00.

David Loth's "fine Italian hand" is admittedly appearing in a surprisingly wide variety of volumes lately. (Most recently he "ghosted" a volume on civil liberties for a New York lawyer.) But neither he nor Dr. Rock has lost anything in this collaboration. It was, of course, Dr. Rock, an eminent Boston gynecologist, who provided the medical material and social biology in this book. In style, content, and spirit it deserves an equal place on the shelf with volumes such as Bertocci's, Fishbein and Burgess', Magoun's, and the Stones'. Unlike them, it treats only birth control but does so in historical, social, and economic terms much broader than the technical factors involved.

In biological, health, community, and cultural values the book explains, lucidly and simply, how it is that controlled and rational parenthood, truly voluntary parenthood, is the goal of all enlightened modern people. The books four basic theses are: (1) rid yourself of fear and shame about sex and parenthood; (2) have your children young and have them fairly close together; (3) let your heart and your head combine to decide how many, with the conviction that they are the surest means to a gratifying life; (4) get medical advice regarding any problem concerning contraception.

A brief chapter on "Ethical Problems of Fertility" traces our Western cultural roots to two moralities: the Greek, which favored birth control because Greece was small and overpopulated; and the Jewish, which favored high fecundity because the Palestinian land was underpopulated. As between rhythm advocates and contraceptionists the authors say that two things should be noted: (1) they are both agreed that voluntary parenthood is a legitimate and desirable thing, and (2) each of them "is right when it states its own case and weak when it attacks the other's." (Dr. Rock makes it quite clear that there is practically no medical support for rhythm as against contraceptives, as far as efficacy is concerned.) The conclusion (p. 280): "Why it should spread immorality to entrust physicians with the power to prescribe contraceptives for reasons of health but does not encourage immorality to permit condoms to be sold in every drugstore and rhythm calendars to go through the mails to the married and the unmarried, the adult and the immature, the knowledgeable and the ignorant alike, it is hard to say. On the other hand, why either should doubt the real desire of the other to promote the kind of family life both hold up as the ideal is not apparent." This is impressive testimony to come from a Roman Catholic physician.

JOSEPH FLETCHER

A Man Approved: Leo Trese; Sheed and Ward, New York, 1953. 152 pp. $2.25.

This reviewer has an earned reputation as the all-Protestant (rather than all-American) endorser of Roman Catholic works in the field of pastoral and ascetical theology. This volume of addresses prior to meditations at a clergy retreat-conference by Father Trese (of the National Catholic Rural Life Conference) stirs up again the claim that Sheed and Ward are doing the best job on religious publishing in England or America! A great many non-Roman Christians find it hard to winnow the great profit there is for them in these books because they cannot remember that "protestant" means to *affirm* (*pro testare*) and not to negate, and that much of what devout Catholics affirm, they affirm in common with *all* Christians!

Father Trese was a student at Mt. St. Mary Seminary in Cincinnati where the traditional training in pastoral theology was centered in the principle of universal priesthood and the ministry of the laity in earthly and practical terms. This spirit is reflected throughout Father Trese's approach, as a priest, to problems of vocation, sacramental offices, conduct of public worship, preaching, death, prayer, and the virtues of obedience, humility, and charity. It has, as a volume, much in common with the qualities to be discovered in old Anglican treatises on *speculum sacerdotum,* and even with Gregory the Great's *Pastoral Care* (which in essentials is as modern as anything to appear in this *Journal*).

JOSEPH FLETCHER

•

An Inquiry Into the Intimate Lives of Women: Marc Lanval; Cadillac Publishing Co., New York, 1950. 243 pp. $3.00.

This is a translation of a 1937 book entitled *L'Amour Sous le Masque.* Thus the American title "out-does" the French title. Dr. Lanval is Belgian. His method of distributing questionnaires, the schedule of inquiry in them, and their utter inadequacy as statistical samplings combine to make his findings about the sex habits of Belgian and French women of no scientific value whatever.

JOSEPH FLETCHER

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Conference on Divorce: Karl N. Llewellyn, Chairman; University of Chicago Law School, Chicago. 1952. 91 pp. $2.00.

Eleven papers on four subjects by specialists in law, legal theory and court practice, judges, sociologists, and marriage counselors from four cities and three universities. The subjects were (1) present divorce law and practice, (2) a critical analysis, (3) proposals for revision, and (4) social and legal aspects of family conflict. Throughout the papers and the discussions (as one would expect with Professor Llewellyn in the chair) there is much attention given to the psychological and cultural factors at stake in broken marriages and socially rectified marital failures.

JOSEPH FLETCHER

The Way of Man: Martin Buber; Willcox and Follett, Chicago, 1951. 46 pp. $1.00.

Six tales with Professor Buber's commentary, taken from the traditions of hasidism, an Eastern European form of Jewish mysticism in which it is held that God is more fully met in the full world-embracing round of human experience than in trying to withdraw from it. "God dwells wherever man lets him in." The commentary employs the concepts well-known to be Buber's guide lines, especially the I-Thou encounter and the decisive importance of all "existential" experiences. His central theme here is that, in affirming the world, it is transformed.

JOSEPH FLETCHER

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The Intimate Life: J. Norval Geldenhuys; Philosophical Library, New York, 1952. 96 pp. $2.75.

A small and very expensive little book by a South African, which is actually a summarization of a longer work published years ago in Johannesburg, entitled *Marriage.* It is much more "pious" and "moralistic" than the American cultural temper allows. Its major treatment has to do with birth control, but what it says can be had infinitely cheaper and more fully and sharply set forth in such domestic volumes as the Stones' *Marriage Manual.*

JOSEPH FLETCHER

OUR REVIEWERS

Thomas W. Klink is Protestant Chaplain at Topeka State Hospital in Topeka, Kansas . . . *Seward Hiltner* is Assistant Professor of Pastoral Theology at Chicago Theological Seminary . . . *Rollin J. Fairbanks* is Lecturer in Practical Theology at Harvard Divinity School and an Associate Editor of our *Journal* . . . *Robert A. Preston* is Protestant Chaplain at the Veterans Administration Hospital in Topeka, Kansas . . . *Owen C. Thomas* is an instructor in theology at the Episcopal Theological School in Cambridge . . . *Joseph Fletcher* is Professor of Christian Ethics at the Episcopal Theological School in Cambridge, Massachusetts.

NOTES AND COMMENTS

The Reverend Robert D. Morris, founder of *The Journal of Clinical Pastoral Work* and present Associate Editor of this *Journal,* leaves his position at Episcopal Hospital, Philadelphia, Pennsylvania, where he has been for the past eleven years, to become Minister to Families and Director of Research at the First Community Church, Columbus, Ohio. Before reporting there in May he will fly to London, where he will do a follow-up study on the families associated with the Peckham Pioneer Health Centre, at which he was Research Associate for nine months in 1948.

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Lloyd E. Beebe, having completed the work for his Master's degree at Andover-Newton Theological School with clinical pastoral training included, has recently become Chaplain for the Albany (New York) Council of Churches.

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The National Council on Family Relations will hold its annual conference at the Kellogg Center for Continuing Education, East Lansing, Michigan, September 1-3, 1953. Information may be obtained from the Council at 5757 South Drexel Avenue, Chicago 37, Illinois.

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New Chaplain at the Federal Correctional Institution, Ashland, Kentucky, is Carl E. Ehrhart, who recently completed twenty-four months of clinical pastoral training and three months of in-service training.

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The Reverend Rollin J. Fairbanks, founder of *The Journal of Pastoral Care* and present Associate Editor of this *Journal,* has been appointed full Professor of Pastoral Theology at the Episcopal Theological School in Cambridge, Massachusetts, effective July 1, 1953. He has been teaching there half time, lecturing at the Harvard Divinity school, and directing the Pastoral Counseling Center in Boston.

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Following a ten-week summer course and a nine-month interneship at North Carolina Baptist Hospital, Winston Salem, Harry McCartney is the new Chaplain at Eastern North Carolina Sanatorium at Wilson.

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Yale University announces the eleventh annual session of its Summer School of Alcohol Studies, to be held June 28-July 23, 1953. Interested Protestant clergymen and religious workers of all denominations should write for application blanks to Department of Pastoral Services, National Council of Churches, 297 Fourth Ave., New York 10, N. Y. All applications must be submitted by April 15.

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The 16th Groves Conference on Marriage and the Family is being held at Ohio State University, Columbus, April 20-22, 1953. Limited to 150 participants, the conference is interracial and invitational and will devote its discussions this year to the need for stock-taking in the field.

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John Whitesell is the new Chaplain at the Syracuse State Hospital, Syracuse, New York. Chaplain Whitesell's clinical pastoral training was taken in connection with his work for a Ph.D. degree at Boston University School of Theology.